# BROTHER BILL'S LETTERS

AND
BUSINESS
BUILDING
ARTICLES

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# BROTHER BILL'S LETTERS

AND

# BUSINESS BUILDING ARTICLES

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1909

# INTRODUCTION

**Dentistry as a means of service is a profession;**
**As a means of livelihood it is a business.**

The articles in this book appeared in The Dental Digest during 1909. They are reprinted in this form because they deal with a phase of dental practice which is greatly in need of attention; and because they have proved helpful to many readers.

No thinking observer can avoid a feeling of profound sorrow when he notes the financial condition of dentists in general. Many of them have served their profession well and some with distinction; yet the vast majority pass their old age in straitened circumstances or in want. And many have been buried by the charity of those who, living, face a like end.

There is nothing inherent in the practice of dentistry necessitating such business failure. On the contrary, it offers, when rightly conducted, unusual opportunities for noble service to humanity and money reward to the dentist. Our failures to amass competences lie wholly at our own doors.

We have listened with such singleness of ear to professional instruction, that we have not heard the call of Business, till old age has seized us and grim Want grasps at our remaining crusts and laughs at our feebleness.

No greater service can be rendered the profession at the present time, than to sound in all ears the Call to Business. We need not lower our professional standards; we may continually advance them as of yore; but we should grasp this other standard of Good Business Methods and bear it aloft and ahead with the professional standard.

Every dentist who skillfully and honestly practices his profession for a score of years, should be able to live in comfort during that time and retire on a modest competence. Many will do much more.

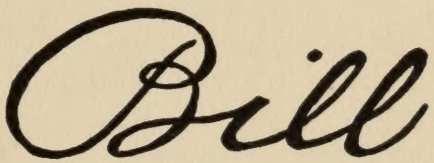
Let us face this matter with open minds and without hypocrisy. Let the practitioner learn and the student be taught good business methods. And may the day soon come when dentistry means not only rendering valuable services to those in need, but also an assurance of plenty to him who serves.

GEORGE WOOD CLAPP, D.D.S., *Editor.*

# PREFACE

Little thought was there when I wrote these letters, that they would reach so wide and interested an audience. They were written from experience and from an earnest desire to help financially those to whom they went.

I am happy to know that they are now helping others. I wish they might hasten the day when dentists everywhere shall awake to the business possibilities in our profession.



BILL HAS A CLASSMATE "HARRY," WHO IS NOT MAKING ANY REAL PROFITS FROM HIS PRACTICE. BILL WRITES HIM SEVERAL LETTERS IN AN EFFORT TO TEACH HARRY HOW TO MAKE MONEY. THESE ARE REPRODUCED HERE AS LETTERS ONE, TWO, THREE, AND FOUR.

## LETTER ONE

TOLEDO, OHIO.

FRIEND HARRY: Your letter reached me at Chicago. I have been waiting for leisure to write out some facts that I want to give you. If they do you as much good as a business man once did me on the same subject, I shall be very glad. Your letter says you are working very hard, and are making a good living, but when you figure up at the close of each year, you find that, in spite of careful living, you have been enabled to save but little. The reason you give is that people of your town will not pay good prices for dentistry.

As I visit dentists about the country, I hear a good deal of this sort of complaint. When I was young and green I believed it, too, and I conducted my practice on that basis. I let fear of patients keep my fees down. I shall never forget the occasion that brought me out of it.

I had just finished a very hard year's work, and had been figuring over my books to see what had become of the money. I didn't need to figure up

my savings, because there weren't any worth mentioning. And the more I figured the bluer I got.

I remember distinctly, it was a stormy afternoon and the office was free from patients. I stood looking out the window, thinking how much the weather harmonized with my feelings, when I happened to see Albert McQuirk, the best all-round business man in the city, going along the other side of the street. With a sudden inspiration, I put up the window and called to him, since I knew him real well. He came in. As soon as he got settled, I laid my case before him, telling him all the facts. When I got through, I asked: "Now, what's the reason that, with this excellent equipment, a good education and an enormous amount of hard work, I'm not making money?"

## BILL GETS A LESSON IN THE THEORY AND PRACTICE OF BUSINESS

He said at once: "Your prices are too low; raise them. What you need is not more equipment or harder work. You need a practical lesson in business sense. Let me give it to you." I answered:

"I'm afraid to raise prices. Drs. A, B and C, right near me, work for these fees, and I'm afraid that, if I raise my prices, all my patients will go to them."

He didn't make any answer to this, but took out a pencil and a pad and began to figure, asking me questions in the meantime. "I'll show you," said he, "how I figure what to charge for a thing."

"What did it cost you to go through college to get a dental education?"

"Fourteen hundred dollars," said I. He put that down to head a column.

"It took you three years, didn't it?"

"Yes."

"Well, you probably could have earned $12 a week during that three years, but, in order to make sure, we'll put down the total at $1,500."

"What did your office equipment cost?"

I figured a few minutes, and said: "Well, it's all good quality, and it cost quite a good deal over $1,000."

He put the thousand dollars down under the other two items.

That made a table which looked like this:

| | |
|---|---|
| College expenses | $1,400 |
| Value of time in college | 1,500 |
| Value of office equipment | 1,000 |
| Total | $3,900 |

Then he started another little table, asking questions that he might get the information for the figures. I was surprised at his keenness. He asked my operating expenses, and we figured out as follows:

| | |
|---|---|
| Rent | $300 |
| Electricity | 24 |
| Gas and heat | 50 |
| Phone | 36 |
| Girl | 300 |
| Laundry | 60 |
| Supplies | 300 or over. |

These made a total of $1,070, at which I was dumfounded. I hadn't imagined it was nearly so great. He put this total down, and then added $100 for office depreciation annually. Then he insisted on adding 10 per cent. on the total investment, which amounted to $390.

His next question was, "How much do you think

you should earn annually?" I didn't know at first, but, after a little studying, I said, "$2,000." He put this down as the last item in the table. That table then looked as I write it here:

| | |
|---|---|
| Annual expense ..... | $1,070 |
| Annual depreciation ..... | 100 |
| Ten per cent. on investment.. | 390 |
| Should earn ..... | 2,000 |
| Total ..... | $3,560 |

This totalled up $3,560, which the office must produce annually, if I was to get $2,000 out of it.

### THEY FIGURE THE RUNNING COST

"How many hours a year ought a dentist to work?"

We studied this over and decided to allow for two weeks' vacation and two weeks for sickness and dental meetings. This left, in round numbers, 2,400 hours a year. McQuirk then deducted 10 per cent. for lost time, idle hours, broken appointments, etc. This left 2,160 hours, and when we had divided this into the $3,560 which the office must produce annually, we found that the

cost of running the office was $1.65 an hour. Mr. McQuirk said: "You'd better base your charges on a minimum of $2 per hour." This looked easy enough, but when I turned over in my mind that it frequently took an hour to put in a good amalgam filling, and sometimes several hours for polishing teeth, treatments, etc., all my old fears came back. I said: "The people will not pay it."

"Who has the best dry-goods store in town?" asked McQuirk.

"Hutchins," said I.

"Do you trade there?"

"Yes."

"Why?"

"Because he carries the best goods."

"Doesn't he charge all they're worth? Hasn't he about all the good patronage in the city?"

### THE BIG IDEA HITS BILL

I hadn't had time to answer "Yes" when *The Big Idea* hit me. Hutchins was prosperous, *not only* because he carried the best goods, but also *because he charged the best prices.* And all the best people in town paid.

I was so filled with this perception that, as soon as McQuirk went, I put on my hat and coat, and, in spite of the storm, went to Hutchins' store and

I watched several of my patients at the counters. The high prices did not keep them from buying.

walked about for an hour. Although the storm raged outside, there were quite a few people inside, and I met at least a half dozen of my patients. I

watched them carefully. Some, whom I feared to charge a proper price, were buying liberally, *and the prices didn't seem to hold them back.*

I couldn't do another stroke of work that day. I had The Big Idea, and I didn't want to see anybody. I went to the office, locked myself in, and there I thrashed the whole matter out. The Big Idea was simply this: Offer the best at a proportionate price, and don't show hesitation or fear about charging it, *because it's worth it.*

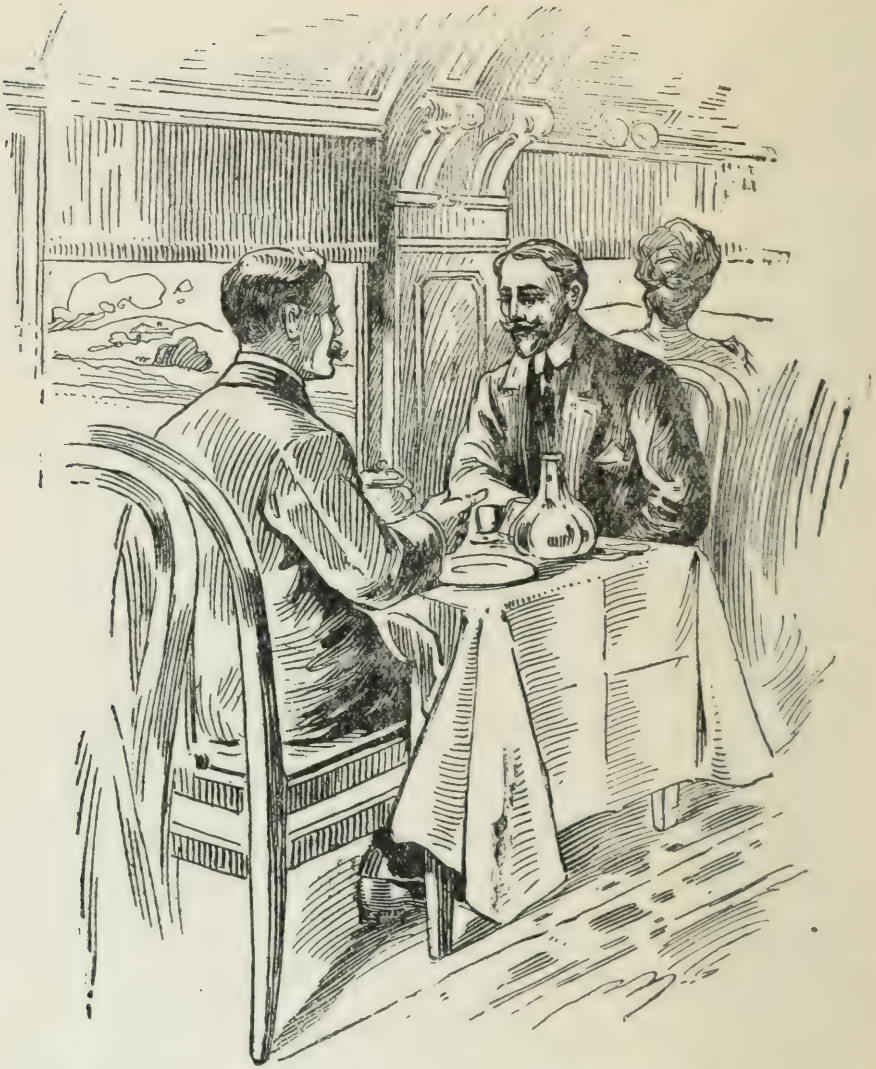
The office opened the next morning on a basis of $2 an hour as a minimum, and ran that way all the year. My earnings exceeded our estimate, and twelve months later I had $1,500 in the bank. Now the price per hour is several times $2 and the savings are larger, also.

Of course, I lost some patients, but very few, and mostly the ones I was willing to lose. They were more than replaced by new ones, who came partly, I think, because I had the courage to charge higher prices. They felt my service must be worth more, or I wouldn't dare to charge more. I had to do a good many pieces of work at lump prices, but in lumping the price I estimated the time at $2 per hour.

During the first few months I had to do a great deal of talking and educational work, but it all paid, and paid well.

I came here from Chicago on the Lake Shore Limited. You know the Limited is the most expensive train, with the exception of one, on the road. You can have every comfort—meals, bath, shaves, beds, shines, manicures, tailoring and typewriting —each for a consideration. It always interests me to see how many people are willing to pay the consideration for the sake of the conveniences.

As I sat in the dining car, thinking over your letter and dreaming of these old experiences, Mr. Smithers, the grocer, from your city, came in. I've known him slightly for several years, and was very glad to hail him. We had dinner together, and from him I got some facts concerning your town. I want to give them to you. I was interested to note his dinner order, because your letter was in my pocket. He is from your town, and, presumably, is one of the people whom you say cannot afford good prices for dental work. He spent $1.50 for dinner, and gave the porter a quarter. I inquired after some people I know in your city, and purposely spoke as if the place were



Smithers is one of the people you say can't afford good prices for dental work. He spent $1.50 for his dinner and gave the porter a quarter.

not very prosperous, and one couldn't hope for much there. Mr. Smithers took this up at once.

He said, and seemed to prove, that most of the people who deserved to prosper were prosperous. Said the people lived better each year both as to the furnishings of their houses and what they had on their tables.

He claimed his business proved this. About a year before the panic he put in a high-priced line of canned goods. He did it hesitatingly, because the price per can was so high; he didn't believe people would pay 35 cents a can for peaches, when the next can on the shelf (peaches also and formerly considered good) sold regularly for 20 cents. But his sales of the higher-priced goods are almost double that of the cheaper peaches. People appreciate the quality, *and the price doesn't keep them from buying.* He says many people buy them regularly whom one might not think would. Many other lines in his business show the same results, and he has almost remodelled his stock on that basis.

Some years ago his son acquired an interest in the furniture store next door. At first they didn't have the nerve to carry fine furniture at good prices. But after a while they put in a few good pieces and showed the public the difference. Their trade has

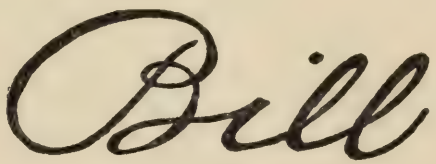
doubled, and is now largely in fine goods, quartered oak, mahogany, etc.

I might write you much more that he told me, but this is enough. It shows me very plainly that you're just where I was that stormy afternoon. While other folks have gone ahead, you've stood still till you've acquired the "stand still viewpoint." Your patients are prosperous; they have money for what they want; they have money for the best dentistry you can do at fees that will one day give you a competence. You need a post-graduate course—but not in the theory and practice of dentistry. You need it in the practice of business under somebody who knows how to make money. Your work is too one-sided; professional interests have crowded out business sense. Shut your office and go to the stores. Watch your patients buy the best merchandise at top prices. Get The Big Idea—that your services are worth as much as any merchandise. If you were a good business man—if you knew how to sell your knowledge and skill—you would find your fellow-townsmen asking for the best you could give—and paying proportionately.

Wake up, Harry. You've lost time enough.

Make the remaining years count financially. Give your people good dentistry at good prices. Quit selling 35 cent peaches for 20 cents.

Yours,



HARRY ANALYZES THE COST OF CONDUCTING HIS PRACTICE, AND IS ASTONISHED AT THE RESULTS. HE WRITES TO BILL FOR SUGGESTIONS. BILL REPLIES.

## LETTER TWO

My Dear Bill: Yours of the 17th, telling how a business friend helped you learn what it was costing you to practise dentistry,* was duly received. Few letters have given me more cause for serious thought.

I had never analyzed my practice on any such basis, but from the facts that I get the fees common to the community and that considerable money passes through my hands, I supposed I was doing well. After a lot of study I went over my annual expenses on your friend's plan. I found them to run as follows:

| | |
|---|---|
| College expenses..... | $1,200 00 |
| Value of time in college (I took your estimate).... | 1,500 00 |
| Value of office equipment, over ..... | 900 00 |
| | $3,600 00 |

* Letter Number One.

ANNUAL OPERATING EXPENSES:

| | |
|---|---|
| Rent at $20.00 | $240 00 |
| Electricity | 18 00 |
| Gas and Heat | 40 00 |
| 'Phone | 18 00 |
| Girl | 260 00 |
| Laundry | 40 00 |
| Supplies, from last year's bills | 375 00 |
| | $991 00 |

SUMMARY

| | |
|---|---|
| Annual expense | $991 00 |
| Annual depreciation | 100 00 |
| Ten per cent. on investment. | 360 00 |
| | $1,451 00 |

I didn't include any sum as salary because I wanted to find out what salary I was making.

My business last year amounted to $3,070. When I subtracted my expenses from that I was surprised to find it left me only $1,619 as my salary. That isn't nearly as much as I thought I was making. I didn't think it *could* cost so much to run my office. I always "guessed" that I was making about $2,400 a year. But after my next calcu-

lation was made, even the $1,619 looked like a good income.

My practice is largely a family practice among good people. They seldom pay when the work is done, but I send them bills at the end of the month. I have gone carefully over my books, and I find that over $400 worth of last year's work is still unpaid for. In other words, I have earned *in cash* about $100 a month. No wonder I have never saved anything and that the family history has been one of self-denial for the wife and children.

What shall I do? I seem to be in the midst of a mental hurricane. Here at middle age I suddenly find myself to be working for the hire of a first-class clerk and not getting all of that. *I must do something and do it quickly.* Old age and infirmity come on apace. But I must do wisely, I must not wreck what I have so far accomplished.

Help me, Bill. Tell me what to do. You have been through all this and won. I know that if you quit practice now your savings would keep you in comfort. I used to think that only a special gift from Heaven enabled a dentist to make and save money, but the figures in your letter give me a ray

of hope. They indicate that such ability comes from the use of common sense. And I have that. Tell me how to use it.

Yours anxiously,

HARRY.

CHICAGO, ILL.

MY DEAR HARRY: Your letter giving the results of an analysis of your practice and your appeal for help has so gripped me that I gladly drop everything to answer it. Let me say right here that your practice is not by any means alone in the state you speak of. I'll bet that when nine dentists out of ten learn to analyze their businesses they'll find themselves in the very same boat. And I want to give you, as your first mental prop, this very comforting fact: I never knew a competent, conscientious dentist to set about remedying these conditions that he did not make a success of it. The happiest thought of my idle hours is that I've helped some of my friends put themselves on the right track financially. And I'm going to help you.

You are right in saying that I've been through your experiences. There isn't a single phase of

practice from absolute poverty to "easy street" that I haven't experienced. And in that experience I've had some brain storms that I'll never forget.

Let me make one point very plain. The first revolution must be within yourself, and *you must fight it and win.* Take your tables of costs and add to them the annual salary you feel that you should earn. You'd better make it $2,000, *and lay plans to get it all.* Now there is just one way to earn the $3,451 which it takes to bring your salary up to this point, and that is to advance your fees to the point that will produce $3,451 in not over 2,000 hours actual working time.

That means you must establish a minimum fee rate of $1.70 an hour to come out just even. You'll do better to make your minimum rate $2 per hour, for several reasons. First, you can get that just as easily as you can $1.70. Second, if you earn a little over the $2,000 annually it will not harm you any. Third, two dollars an hour is plenty low enough as the fee for good work in a modern office with your expenses.

When I see patients for whom dental work has stood ten, twenty or thirty years, and rendered

immeasurable benefits to the health, vigor, effectiveness and appearance of the wearer, I think the dentist who put it in should have received a dollar a minute. That was about his share. Think of a lady paying $100 for a breastpin and $10 or $20 for the restoration of a tooth. You needn't be afraid of getting more than your share. Your only question need be as to how to get the thin edge of your share.

And now I come to your hardest part. When you make a rate of $2 an hour, *stick to it.* Don't lop off ten minutes here and fifteen minutes there. Don't pass treatments without charging for them. You don't benefit any by an extended, difficult treatment. If John Jones presents with a molar that taxes all your skill and patience to save, let *him* pay; he is the one who benefits by saving that chewer. Don't you pay for it out of your little capital by cutting the time charge. Instead of that, add a little to the bill for good measure and extra hard work.

Probably the thought of such advances in fees will scare you some. When I first planned that, I had an all-gone feeling in my stomach that made my backbone weak. Before my mind there ran a

mental moving picture show of all my patients climbing other dentists' stairs while I sat idle and harder up that ever. But it doesn't work out that way at all.

When a dentist has done good work his reputation carries him safely through, and *nothing else helps a good reputation like charging good fees.* Strange to say, people like it; they think more of him and his work. Perhaps he will lose his cheaper patrons, but he'll get better ones in the end.

Soon after I raised my fees I had a case which was a valuable lesson to me along this line. A patient presented wearing a partial plate on the upper jaw. His upper cuspids were in place and as sound as rocks. So were the first molars. I persuaded him to let me put in a bridge. I didn't name a price at first because I wanted to think over how much I could charge. (You see The Big Idea had changed my notions. I no longer figured to see how cheap I could do the work; I was figuring from the other end; that is, to get my share.) I gave him a fine piece of work and named a price of $2 per hour plus all laboratory costs. That brought the price for the bridge to $100, half as

much again as any other dentist in town would have charged for the same piece. When he came to pay he kicked like a two-year-old. I hung to The Big Idea, and presented my side pretty clearly. He paid, but was by no means satisfied. I felt scared and uneasy inside but managed to put up a bold front. And there were a good many hours afterward when I felt like giving part of the money back just to keep him satisfied. He told most of his friends what a high price I charged him. Very frequently that led to an exhibition of the bridge and some discussion. He was honest enough to praise the work.

Shortly after this my practice began to grow in a very pleasing manner. Some mighty fine people, whom I had long wanted, came in. I noticed they never kicked on the prices. Long afterwards I learned that several of them had come because this patient had advertised me so extensively as the highest-priced dentist in the vicinity. Six months later he came back to have his lower teeth fixed and paid a stiff bill with only a good-natured grumble. The moment when he came in the door was one of the happiest of my life. It proved that high prices were a good drawing card.

From that day to this I've been the highest-priced dentist anywhere around. I intend to continue so if I have to make my fees $20 an hour to do it. It brings the very best people in the community as nothing else would.

A good many of my friends, spurred by necessity, have raised fees once, and nearly every one has found it so easy and successful that he has raised them several times. And every one has found such action to be successful.

It makes all the difference in the world how you go about raising fees. The best way I know of is to send a card to all your present or prospective patients something like the following:

> JOHN DOE, D.D.S.,
>
> *respectfully announces that on May 1st his fees will be advanced.*
>
> 27 MONROE STREET, APRIL 15, 1904.

Maybe you'll feel pretty nervous, but it won't feaze those who get it. It is the best sort of a notice to the public that you have confidence in

yourself and that the public has confidence in you. It's a sort of prosperity notice. It will save you a world of talk and explanation.

I wish I'd done this when I first advanced my fees, but there wasn't any time. The Big Idea of good service at good fees hit me one afternoon and I put it into effect the next morning. And I pretty nearly talked my head off for the next six months. I had to justify each advance to each individual patient. A card like the above would have avoided much of that talk. I use the cards now, and they work like a charm.

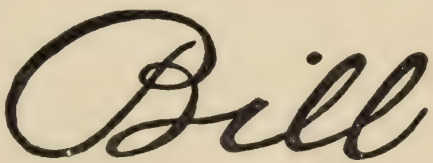
Of course you can vary the card to suit yourself, but I want to advise you against making any explanation or excuse on it. These weaken the original strength of the bare statement. I believe it has more effect alone.

Now here's where you need your nerve again. Don't lump prices any more than you are compelled to. When asked for an estimate on doubtful work, say you cannot make an exact estimate but you'll make it as reasonable as you can. Stick to that plan and you'll get full fees for treatments, etc. You'll need to make some explanations as to why such work runs into money, but your patients aren't

fools. They care for money, but most of them care more for health.

Above all, wear a look of smiling prosperity. When patients "kick" at fees, explain that you mustn't do the work unless you do your best, and that the demands on your time are such that you can't do it for less.

You have another problem; it is to get the money now due. Write those who owe you, calling the account to their attention. Hint that they have forgotten it. Ask prompt payment. And keep at it till you get it. You'll master your problems. You'll win and be prosperous. If I can help you further, write me.



HARRY WRITES THAT HE DESIRES TO ADVANCE HIS FEES, BUT DOESN'T KNOW HOW. BILL WRITES ONE EXPERIENCE OF HIS OWN ALONG THAT LINE.

## LETTER THREE

My Dear Harry: You write that you have decided to advance your prices as suggested in my letters. This gives me real pleasure because I want to see you prosper. And I'm sure if you follow the plans I have outlined, you will make a good deal more money.

You say that you don't know just how to educate patients into better fees, and a better quality of work when necessary. Well, some of my experiences during the first six months after The Big Idea* hit me are so burned into my memory that I don't believe I'll ever forget them, and I'll do my best to write an outline that will help you. As I wrote you, I nearly talked my head off during that time, but after a while I found this talk settling into pretty definite lines. Maybe by writing you about it I can save you wandering, verbally, all round Robin Hood's barn, as I did at first.

It will probably help if I tell you the story of a German family whom I finally secured as pa-

* The Big Idea was "Good Service at Good Fees." See Letter One.

tients, at advanced fees, after nearly talking my lower jaw loose.

### THE INFLUENCE OF THE TOWN ON FEES

First, however, I want to tell you about the town, because so many dentists have the notion that there is everything in the town. They understand how a dentist located in another town can advance fees, but they think that no matter how low their fees may be the people of their own community will never stand for it. There is very little in this notion, as a description of the town in which I then practised will show you. If fees could be advanced in such a community, they could almost anywhere.

It was a farming town of about 2,000 people, located pretty well to one side of the stream of progress, without one industry or factory to support it. It depended wholly upon the farming country around it. There was the usual small circle of people who had money, the much larger circle of the people who were merely comfortable, and a considerable number who were not good for anything to anybody. A few of the aristocrats preferred going to the city for their dental work.

Seventy-five per cent. of the annual practice came from the surrounding country, from the farmers and the farm boys and girls.

I was the seventeenth dentist in the town and the fifth who had occupied that particular office or the one next door to it. Merely as a matter of interest, I collected the history of sixteen of my predecessors. One of them saved up enough money to build a couple of small houses which he sold at a profit. He died shortly afterwards, and I have a suspicion that the shock of really making some money hastened his death. By staying single and living on a dollar a day, another one managed to save up $2,000 in the course of several years, but he refused to get married, because if he did he knew he couldn't save anything. The other fourteen died poor or moved away equally poor.

When I began there, the public knew no more about good dentistry than the people of any other country community, and they were no more anxious to hand out the dollars earned under the blazing sun of the wheat field or in the dust of following a harrow, than anybody else would be.

And I had competition to burn, six other dentists within ten miles, and only 30,000 people in the

whole county. These dentists were all clever fellows and gentlemen, but they had the fatal notion of doing work as cheap as possible, and by dint of industry they had gotten prices down to next to nothing. So when I put a minimum price of $1.00 on cement and amalgam fillings, with a devitalizing or treatment charge of $2.00 added, I had to talk the public into it. And I had to talk them so firmly into it that they would stay satisfied when they ran up against the other dentists' cheaper prices.

### EDUCATING A GERMAN FARMER

The father of this family was a German farmer, living several miles from town and slowly becoming well-to-do by a persistent course of going without things. He had eleven children, and as dental work, save of the cheapest kind, was regarded almost as a waste of the sacred dollars, it had been one of the things gone without. Now, however, persistent toothache suffered by two of the older girls, demanded attention. So he brought them in.

An examination of the older girl's mouth showed the anterior teeth to be too far gone for anything but crowning. The posteriors showed a few amal-

gam fillings with different stages of recurrent decay, two exposures of vital and inflamed pulps, one or two pulpless teeth and a few cavities. The second girl's mouth was in about the same condition.

The father wanted to have the older girl's teeth all extracted and a plate made because that would be cheaper—and a minimum of expenditure was dear to his heart. The girl was largely of his opinion.

I talked as intelligently as possible against such a course. I explained that the girl was only 23 years old and would, we hoped, live many years. I called attention to the fact that she was too good-looking to have her appearance mutilated in that way, and that I could make her look much better if he would let me save the remaining back teeth and crown the front ones with porcelain. That "good-looking talk" sort of won the girl over, and she softened the old man a bit. But he wasn't converted yet, and the good looks thought was so new to the girl that she couldn't give it very much force.

So I went on to explain that the girl's health would be better with her natural teeth than with a plate. The old man thought he answered this by taking an upper plate out of his own mouth and

telling me "I'se worn this plate many years: I eats everyting with it." But I pointed out that the natural teeth were firmly rooted in the jaws. They couldn't tip. Nothing could get under them, and *when properly fixed they wouldn't ache.* I assured them that the job of extracting those big molars would not be an agreeable one for the girl, nor would the period while the gums were healing be comfortable. This mention of the hurt of extracting, which I purposely made, brought the girl over to my side and sort of stopped her dad.

By this time I'd been talking half an hour as plainly and intelligently as I could, taking pains to use words I was sure they could understand. *And I hadn't mentioned a price.* Remember that, I hadn't said a word about costs. All this time I'd been trying to build in their minds a mental picture of the comfort and health and beauty of the completed work as I saw it in my mind's eyes. And I wanted this picture clear cut and attractive in their minds before I jarred them with the cost. I could see it all plain enough, well selected crowns in front, good amalgam fillings in back (I didn't even hope for anything better). When I'd gotten this picture partly completed, first in the girl's mind

and then in the father's, he asked the question I dreaded, "How much vill all dat cost?"

I'm ashamed to say that I weakened a little on my time estimate for some of this work. I said, "It will cost $3.00 each to treat and fill those molars, and $2.50 each for the teeth just in front (the bicuspids)." "How much vill all dat be?" he said, determined to know the exact figures. I told him, and then the fat was in the fire sure enough. He said, "No sir, your price is too high, I von't pay it; I pay the last dentist only 50 cents a piece for those fillings, and look at them now. I pay you no more. Day aind vorth it." Then I had to explain why the fillings had failed so soon —that the other dentist hadn't charged a price which made it possible for him to take the pains I wanted to take, and that it was taking pains that made good dentistry. I instanced the early failure of cheap clothes, hats and shoes. I asked if he paid a fair price for farm machinery. He said, "Yes, because good machinery was vorth it." His daughter bought good cloth for her dresses. She didn't expect dollar a yard cloth for 40 cents.

Then I assured him that the work I wanted to do would be much more permanent than the other

had been, and that it would prove, in the end, the cheapest dental work he had ever purchased. I showed him that it wasn't the material used that made good dental work, but the skill and care put into the work.

Here the father and daughter talked some in German and I was glad to rest. I felt as if I had sold all that work about 16 times and some to spare.

Finally the father said, "I got eight more chillens that need dental vork (I remember a few of his phrases), and you make it sheaper, and I bring some more if you do it good." The girl also helped him because now she wanted the work as I had pictured it. She said, "I got lots of cousins that want work (I found out afterwards that it was true) and you do it cheap and I bring them."

I saw where this would end, a cheap price for one and the same price for all the rest. This meant my old fees and hard work and *no profits*. So I said, "I have already given you too low a price for the quality of work I am going to give you (note that I assumed they would take it, just to help bring them), and I can't lower that any and make any money. If I can't make any profit from

such careful work as this must be, I'll have to quit practice." Finally we fixed it up that I should begin on the aching molar and the pulpless bicuspid in front of it. They would come again in three days with a final answer as to the rest of the work.

I had spent over an hour of time and it seemed to me about all my nerve force, and all I had promised was $5.50 worth of hard work yet to be done. Did it pay? Indeed it did. It was one of the most profitable hours I ever put in.

On the third day they came back, and I devitalized the molar and put a second treatment in the bicuspid. They then informed me that they had decided to have a plate for the four upper anterior teeth, but would give me a chance to make good on the other teeth at the prices I mentioned. If the work proved satisfactory, they would see about the teeth of the other children. I completed this work, and an inflamed molar for the second daughter was quieted down, devitalized and filled. They paid, and I heard no more of them for some time.

A wonderful difference took place in the family attitude toward dental work. I gradually worked down through the line of children, coming last to

the boy of 16 years. His teeth showed extensive decay and hyperacidity of saliva. By coöperation with the family physician we got his eliminating organs working properly, corrected the saliva trouble, and repaired his anterior teeth with porcelain inlays.

And that same father and mother who haggled over the price of amalgam fillings came to watch the transformations in the children's mouths with interest and pleasure. It took some sacrifices on their part to pay the bill, but they did it. I had been sacrificing so long for the benefit of the public that it didn't hurt me a particle to see them do it.

Within 18 months I had completed $111.50 worth of dental work for the children in this one family. When I figured over this same work at my old prices, it made a total of only $81.00, so I made $30.50 more than I should have made if I hadn't raised my prices. That $30.50 represented just about my net profits for my savings account. It made all the difference between sirloin steak *and* a savings account and a sirloin steak *without* a savings account. And to my mouth sirloin steak tastes much sweeter when it doesn't take all my money to buy it.

The cousins of whom the girl spoke came in for their dental work. It seems there was quite a settlement of their families, all of the same name. Within two years I had twenty-five of them as regular patients. And here is the interesting thing: from that first day onward scarcely a thing was said about prices, and hardly a word of protest. The cousins came prepared to pay my prices, and did so without a kick. One of them paid me $80.00 for his bridges, and when a German farmer pays $80.00 for his teeth, he's going some. Right around the corner was a dentist anxious to do the work at lower prices than mine. But when the mental picture was right, *the price didn't keep them from buying.*

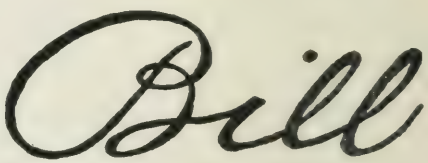
Sometimes, of course, such educational talk failed and I lost the work, but not so often but that it is still the best method of getting business at higher fees than are common in the vicinity. There'll come a day when you will not have to do anything of this sort, when your reputation will justify your fees in the patient's mind before he comes to see you. But while you're building up to that point, try this old and time-worn method of practice building—educate your patients. *Build in*

*their minds pictures of the completed work that will make them want it at your prices. When the picture is done, not before, talk price.*

You'll develop your own methods, but mine were about as described until I got to where I didn't use any methods—I just named the fee. But the educational work had to come first and made the other possible.

Keep your patience and your nerve.

Yours,



HARRY IS BLIND TO MANY PROFESSIONAL OPPORTUNITIES AND BILL TRIES TO AWAKEN HIM.

## LETTER FOUR

My Dear Harry: Ever since you first wrote to me asking suggestions about increasing the returns from your practice, I've been wondering whether I dare write you a very personal letter on the subject of educating patients. You furnished the material the last time I visited you, but I have feared to write, lest you take it as a personal criticism. I have decided, however, that you have sense enough not to do that, and that it may offer more definite suggestions than any other means makes possible.

One morning, as I loafed about your office, a well-dressed, attractive lady came in and said that she wanted a tooth replaced on her upper partial plate. You sat her down in the chair and examined the articulation where the tooth had come loose, and then called me over to see. I looked at the tooth, of course, but I was so much struck with your own blindness as to your opportunities in that mouth that I had difficulty in restraining comment or in seeing the particular repair asked for. You

took a little wax impression and bite of the area where the tooth had come away, and dismissed the patient. When she was gone I asked who she was. You replied, "That's Mrs. M——, wife of our leading grocer who has the fine store on the corner."

I didn't say anything for a while—I couldn't. I was so strongly moved to say unpleasant things about your business ability that I couldn't talk at all. I felt that you deserved to be poor and hard up and have your nose forever on the grindstone. And I knew that as long as you remained as blind to your opportunities as you were that morning nobody could help you.

Let me tell you what a rapid glance at that mouth revealed as to Mrs. M——'s needs and your opportunities. She lost all her lower bicuspids and molars some years ago and some dentist had replaced them with a vulcanite lower partial plate that probably fit when made, but did not when I saw it. It moved about with every movement of the mouth and was held to place only when the upper teeth closed against it. As a result of lack of fit and adaptation, it was then pushing the tissues away from the distal sides of the

cuspids, and the distal cementum and the places where the clasps rested on the labial surfaces were abraded and sensitive.

The natural lower anteriors were in place, but the gums were receding, and one or two were beginning to loosen. There were enough deposits on and between these teeth to account for the irritation at the gum margins and the gum withdrawal. Mrs. M—— looked very healthy, with no visible excess tissue, and I don't believe her gum trouble was due to any systemic cause.

Of the upper anteriors, all were in place except the right lateral. The right central had a big gold contour filling which had evidently been in place a long time. A dark line to mesial of the filling, with a widening area of discoloration incisally, showed where decay was recurring, because the end of the tooth was worn away and had allowed leakage at the incisal edge. The upper right cuspid had a large amalgam filling on the distal surface, running around somewhat onto the buccal. The second molar was in place and looked sound save for an occlusal amalgam filling, apparently in good condition. The upper left cuspid had a full gold crown and the upper left third molar stood about

where the second formerly stood. It had a very large amalgam filling, but seemed sound as a rock. All the upper teeth showed gum irritation and some deposits. The upper left lateral and the upper bicuspids and molars were on a vulcanite plate held to place with clasps that were wearing the enamel of the teeth they enclosed.

Evidently that mouth never presented itself to your vision as a whole. You saw it piecemeal, as its owner brought it to you for a repair of some particular spot that had given out. You probably never thought of putting that entire mouth into first-class condition. But I want to call your attention to the possibilities it offered. And these possibilities were not one-sided—provided you had good sense. They were of the greatest value to Mrs. M—— in prolonged health and increased pleasure. They were valuable to you as a chance to sell your services on a proper plane.

First, you should have put the soft tissues about all the remaining teeth in good shape. That means removing the deposits, polishing the teeth and massaging the gums. You knew about prophylaxis, because we'd been talking it over that very morning, but you evidently regarded it as a matter for

discussion and not for practice, because when you had a chance like this you never mentioned it to the patient.

Next, you should have addressed yourself to the remedy of the havoc the partial plates were playing with that mouth. You saw their effects on the remaining tissues, both in forcing the soft tissues back and in abrading the remaining teeth. And that wear, as you might have seen, must require repair at no far distant date.

Furthermore, you might have seen at a glance by merely having the jaws closed, that neither she nor any other patient could properly masticate food on those plates. I'll bet that 90 per cent. of her hard foods were swallowed half chewed. Moreover, her jaws were coming closer together as the plates settled and her upper front teeth were already beginning to separate a little from the up thrust of the lower anteriors, because the jaws were not properly separated in the back.

There are two or three systems by which a lower partial plate like this can be put in so firmly that the patient will hardly know them from her own. It requires crowning the lower cuspids in this case, and that is open to some esthetic objections, but the

resulting advantages in this case certainly justify such a course. Mrs. M—— is a lady in comfortable financial circumstances. She dresses well, she goes in good society, she has a good home. She can be shown the advantages of having this work done, and that in the best manner. This lower plate should by all means be on a gold base.

Coming to the upper jaw, you have chances for some work that will greatly benefit your patient. Suppose that you have already put the teeth and soft tissues in proper condition as to cleanliness. You will soon have to replace that big gold filling in the central, and it will then be so large as to disfigure her appearance. By taking it out and putting a Richmond crown on that tooth you can support from it the lateral which now is on the plate. That plate has no business whatever in that patient's mouth. Devitalize the upper right cuspid which now has the big amalgam filling, set a Richmond crown on it, crown the second molar and carry a bridge from the cuspid to the molar. At the same time bridge the missing lateral to the cuspid on the distal. Do the same on the left side, using that sound third molar as your posterior abutment.

You will then have a mouth in good condition *as a whole.*

I once heard about a man who "couldn't see the forest for the trees." I guess that meant that he couldn't take any broad view of the situation because his mind was so taken up with the details. You suffer from that trouble, and since someone cured me of it, I find dentists everywhere who are still afflicted. They are so concerned with the details of an operation that it occupies their entire mind. That's the proper way to feel when you get to details, but it isn't proper at first.

I saw a railroad built once and I noticed that the engineers first looked over the ground *as a whole.* When they'd done that, one gang of workers followed another, working down from the broad view of the engineers, to the narrow detailed view of the gang that drove spikes.

That's the way we should, as dentists, first go over the mouth as a whole, realizing the importance of its functions to the general health and vigor. Following the plans as a whole will naturally come plans in detail. And it will be time enough to concern ourselves with details when we come to their proper place. I guess patients aren't

the only ones who need educational work. It looks to me as if we dentists need it quite as much as anyone else. We need to wake up.

I got a hint as to this broad viewpoint from a patient with a broader view than I had. He was a lawyer patient of mine for whom I had done some filling, etc. One day he came in, walked directly to the chair, sat down, and said: "I want you to give my mouth a careful general survey. It isn't doing its duty. I can't chew my food properly."

Well, sir, between the time he said that and the time when I looked at his mouth, I got a liberal education. I'd never really seen his mouth before, that is *as a mouth* with a series of intricate and important functions. I'd seen a tooth here and there and a cavity here and there, but I'd never seen the mouth. I hadn't seen "the forest for the trees."

You know an idea hits me hard when it does take hold, and I turned to the cabinet and fumbled something for a minute, while I let this idea of really looking at a mouth soak in. Why hadn't I thought of that before. What had I been doing all the years? Just tinkering—like a fellow who

recently mended a tire for me and never saw that the wheel was out of true.

When I turned to the chair I was a better dentist than I'd ever been before. In fact I was a real dentist for the first time—a true stomatologist—who had the eyes and the ability to see that mouth as a whole and to study the repair of it as related to the health of the body.

It's immaterial what I did for that lawyer save that I repaired his mouth—not a tooth or teeth—but his mouth. And when I got through it functioned properly. What he did for me was immensely greater than what I did for him. He showed me by one swift, revealing flash what dentistry should be and how it differs from tinkering.

Get this viewpoint, Harry. View a mouth as a whole, as the food gateway of the body, as a laboratory where all food should be comminuted for digestion and the digestion of the starches should begin. Of course it's your duty to allay pain and make small repairs, but these are the details of the greater task.

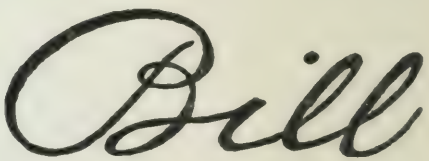
Those two rows of teeth in proper condition and properly used mean health and vigor to the owner. They mean good digestion, proper assimilation,

proper bowel elimination, and freedom from many of the ills that now beset us. More than physicians, more than neurologists, more than anybody else or all put together, the dentist holds the key to continued health by enabling the mouth to function properly, by teaching people to clean the mouth and keep it clean.

Come away from the trees and get a view of the forest. When you do, and join this perception of the needs of the mouth as a whole to good selling ability and your present skill, you won't have any trouble about getting money.

You'll learn to educate patients to your viewpoint and you'll teach them to pay good fees for the repairs you make. You'll rise to new levels, both professionally and financially, and can then do as some of my professional friends do now, lock your office for a couple of months each summer and enjoy the delights which are provided for those who have eyes to see and ears to hear.

Try it.



HARRY MEETS THE COMPETITION OF LOWER PRICES AND BILL WRITES OF A SIMILAR EXPERIENCE AND HOW HE WON OUT.

## LETTER FIVE

My Dear Harry: Your letter saying that you are feeling the competition of lower prices stirs in my mind many an old recollection of former days. You say that a new dentist has moved into the vicinity, that he is advertising low fees, and that he has cut the life out of prices. Lordy! how that brings back some unhappy hours I went through during my first year out of college. That year is long gone by, but one lesson that I learned during it has been invaluable to me; and it had to do with cut prices. I sweat blood while I was learning, but it came out all right in the end. Maybe I can help you by telling about it.

I intended going to N—— when I got my diploma, because I knew a good many people about the town, but a friend pointed out that there were enough dentists there and that as I had no money I'd better go to some small place where I could get business immediately. So I went to S——, because there was but one dentist there and he was a boozer. Besides, he'd never been to college. He'd learned dentistry by working at it. With the training I'd

had it looked like I ought to be able to beat that combination of booze and partial knowledge, so I opened up there.

That story about the booze wasn't any fable and I got business right from the start. At the end of my first month I was $160 ahead, and visions of a grand success floated before my eyes. Things ran along this way for about three months.

All of a sudden something happened. Business got slower and slower until it practically stopped. After a while I found out the cause. My competitor was cutting prices and getting all the business, while I sat and waited for patients who rarely came. My price for an amalgam filling was $1.00; his was fifty cents to begin with, but if he couldn't get that, the price dropped to forty cents and in some cases to twenty-five cents. He didn't want the patient to go out of his office and come to mine. Also he trusted anybody for any length of time.

In the heyday of prosperity I had married and now the little woman in the tiny house at the edge of the town had a pretty hard job to make ends meet. I'd already educated the grocer and butcher into giving me credit, so they didn't suspect any-

thing wrong. But one month my earnings were only $11.00 and that's mighty slim for two young, hungry people. For some days I went about town with just 12 cents in my pocket and no money in the bank. But I didn't drop my prices.

Some instinct told me that cutting prices was the wrong course to follow, because it's so much easier to cut prices than to put them up again. And I knew that in order to make a living I had to have a profit. Whenever anyone came in to price work, I gave them as much information about their mouth as I could. I tried to make them see the need and possibilities of their case just as I saw it. I gave them a fair price and explained that it couldn't be done *well* for less. I did my best to sell the work at my price and on my terms.

A good many people came in and for a while about all of them went out without giving me any business. C——, the other dentist, was as sober as a judge now and fighting for his livelihood. We were outwardly friendly and on occasion borrowed back and forth. But he was backed against a wall, with a booze record, and he proposed to win by starving me out.

Just to show you how keen the fight got, let me

tell the story of one patient, T——, a real friend of mine. T—— needed a bridge put in, and some large fillings in his anterior teeth. I knew what he ought to have and explained it all to him. Then C—— would get hold of him and quote a low price for gold crowns on the front teeth instead of the necessary mesial and distal fillings. C—— had the crowns made for $1.25 each at a laboratory. The teeth required big gold contours which C—— couldn't build. The fact was that C—— was offering very bad dentistry that my conscience wouldn't let me do and I was offering high grade work that C—— couldn't do. T—— was as close as the bark on a hickory tree and hated to pay more than he had to. He would come and tell me C's price and ask me to meet it, promising me the work on even terms or a shade better. But I wouldn't change. I knew that if I did C——'s kind of dentistry or met his prices I was virtually beaten, even if I got all kinds of work. And C——'s prices didn't leave any profit on good work.

Finally, one cold winter day T—— came in to visit and I think to give me his work. C——, who had evidently been watching from his window

came in, ostensibly to borrow some gold. Seeing T—— he sat down and visited until T—— went out, *and went out with him.* Just outside the door he quoted T—— $3.00 a tooth for the crowns and bridgework and got the case. When C—— got through with that mouth, it was nearly a continuous row of full gold crowns. I was mighty glad I wasn't guilty.

Every once in a while I got a case, and it goes without saying that I did my level best with each, not forgetting to educate each patient as I went along. Finally, things began to change. I'd lost all the liquor people and their friends because I'd taken an open stand against booze in all forms; and I'd lost all the cheap skates of every sort. But there began to come in from the town and the country round, some of the best people thereabouts. They took the best I could offer and with a little teaching they paid my prices. In the end I had a nice line of mighty fine people. I got all my debts paid and a little money in the bank, and when I got a chance to move to a better town, I was in shape to do it.

Tough as this experience was, it took out of me the fear of cut prices *unless the other fellow is a*

*better dentist or a better business man than I.* Then, of course, he'd get me. But so long as he merely cuts prices and doesn't raise the quality, I have no fear but that I can beat him.

You need have little fear of a competitor's prices unless he is a better dentist or a better salesman than you are. Educate patients to see the possibilities of their cases, just as you see them. Talk them into appreciation of, and desire for, the best work possible for their case, and back up your work with prices that leave you a good margin over all expense. Make your selling ability save your prices.

Make sure that every piece of your work is well done.

Never let a cavity get away from you half prepared. See that it is clean and properly shaped, and that the filling, of whatever material it be, is put in to the best of your ability. Use especial pains with every piece of prosthetic work and make sure that it is *right* before it goes out.

Keep up the educational work, patiently and repeatedly. Don't hesitate to tell a patient the same thing a number of times; you'll only drive it deeper. But be sure you tell the truth each time.

Never drop your prices to meet price competi-

tion. That is sure to invite defeat. It is a two-edged weapon, because cheap work must of necessity be poor work; and poorly done work is the one thing which you need to fear. With your excellent moral character and pleasant manner, you need fear nothing but a piece of poorly done work of your own. That is a boomerang every time, and it will surely come back to knock your professional head off.

If you work your end right, this very competition can be made to so tie your patients to you that nothing but some fault of yours will ever get them away. Good dentistry and good salesmanship make a combination no price-cutter can beat.

There is a very large class of people who are repelled rather than attracted by cheap prices. You're one of that class yourself. The last time I was at your home I needed some shoes and you took me down town to help me buy them. We passed a good looking store with a tasty window display. I started to go in. You said, "Don't go in there; their prices are low but their shoes are very inferior. I'll show you a better store." And you took me to where I paid twice as much for shoes that looked like some I saw in the first win-

dow. As we came out with the shoes you said, "That's a good deal more than you'd have paid down street, but you'll find the shoes cheaper in the end." It was true. I never bought better shoes or cheaper ones in the long run.

If you'll apply what you told me about shoes to dentistry and tell it to every patient you serve, you'll solve the way to fight price competition, and no price-cutter will ever get your business. People in general don't know anything about dentistry—that's the secret of all the trouble. They don't know what they ought to have or good dentistry from poor. It's the blindest buying they do. And you and I, with our fellow practitioners, are to blame for their ignorance. We're the only ones who can teach them and most of us don't do it. If we'd spend on our patients as much time as is annually spent over discussing "Is Pyorrhoea Systemic or Local," we'd have them so trained that no cheap priced man could get to talk to them. I know, because I've got patients now, that no dentist could do cheap work for if he would do it for nothing and would pay for their time.

Never forget that many people judge the value of a thing by its price. A high price means to them

a high value; a low price indicates a low value. And they aren't so far wrong, provided the dentist who serves them is square. A clean office, aseptic linen, sterile instruments and fine, conscientious technic cost the dentist who offers them a lot of money. The patient soon learns to appreciate them and would rather pay for them than pay a smaller fee and go without them.

As an instance of paying for convenience, take so humble a thing as vaseline. A few years ago we paid five cents for a glass bottle. Now most of us are willing to pay ten cents for a tube holding probably half as much. And the tube is so much cleaner and more convenient, that we pay four times as much for it.

I am writing this on the train, and the newsboy just offered some pretty picture postals of the steamer we recently left, all stamped and ready for mailing. I'm always looking for little hints of service and I asked him how many more he sold since he offered them all stamped. Said he, "I used to have hard work to sell 15 at 2 for 5 cents. Now I stamp up a hundred (with one-cent stamps) and sell them in no time at 5 *cents each*." There's your key—better service at a good fee.

Remember also that a good many people now-a-days are seeking the best in every line, and are willing to pay the price. There's a distinction in being the highest priced dentist in town that draws a good many good payers. These people never go near a man whose fees are low. They assume that low fees mean a low quality of service and they are very often right.

Don't let the price-cutter scare you. If he does good work it will cost him just as much as it does you, and if he does poor work it'll kill him with the better class of people. If his prices are too low to show a profit, he'll quit after a while.

Meet his low prices with high quality and good salesmanship, the best of both in town. And quietly and modestly teach your patients the difference between good dentistry and poor. That fellow may take away your cheap patients. Let them go, and put higher class ones in their place.

Keep your nerve. If you play your game right you'll get him on the run. And you'll improve your practice at the same time.

Bill

BILL GETS A LETTER FROM A NEPHEW WHO HAS JUST COMPLETED HIS DENTAL COLLEGE COURSE. IN REPLY BILL GIVES HIM SOME VERY PRACTICAL HINTS FOR SUCCESS IN HIS PROFESSION.

## LETTER SIX

My Dear Nephew: Your letter saying that you have just completed your dental course brings back the days when I had just graduated and stood facing a world that didn't need me half as badly as I needed it. In fact, I had to get next to that world right away, because my funds were extremely low.

You are very kind to say that you hope you may succeed as well as I have. I hope you may succeed much better, and I am writing this letter to help you do it. I'm not going to write about the theoretical part of practice. You have a good start in that. I'm going to write about the business side of practice, the getting and holding of patients, getting remunerative fees, making and saving money, etc. If some one had given me really sensible advice on these points when I began practice, I'd be thousands of dollars better off now. And I want you to have those additional thousands.

First about yourself. Get it firmly in mind that you're going to make a financial as well as a pro-

fessional success of your practice. Always hold the goal of prosperity before your eyes, and guide your course to reach it. You can do this just as honorably and ethically as not. Never picture yourself as permanently poor, and working toward a poverty-stricken old age. Make up your mind that, no matter what others have done, you're going to be well-off—and that soon. Shape your activities to that end, both in earning money and saving a proper share. Your prosperity picture will help you wonderfully in solving the questions as to location, furniture, fees, dress, social activities, etc., somewhat as follows:

### AS TO TOWN

Go to the town where there is a large number of your kind of people. You can work better among people of your own class or a step higher, than among a class very much higher or lower. If you are cultured and refined in habits and manner, you can easily win that kind of people as patients. If you are careless in person, dress and manner, you'd better circulate in the careless bunch till you get sense enough to do better.

But let me add this word, the cultured class form

the best patients; they carry the largest average of cash, per capita; and when you get their confidence they are the most liberal and consistent money spenders for dental services. So I advise you to conform to their requirements, because only after you conform will they patronize you.

From what I know of your home life, I guess

"My Dear Nephew."

you take to the cultured side of life readily enough, but if you don't, let me suggest that you practise on yourself till you see the worldly wisdom of it.

To get next to cultured people, go where they are in considerable numbers. That will help you select a town, because it cuts out the towns which are largely composed of mill hands, miners, etc.

AS TO YOUR OFFICE ROOMS

Don't fly beyond your means, but do as well as you can. You say you have but little money. All right; make every dollar do double duty, and make up in taste what you lack in cash. Get a clean, light room with an entrance that can be kept clean. Divide it by screens about your chair till you can do better. How well I remember when a $4 screen made the only wall between my reception-room and my operating-room!

Furnish your rooms modestly, but in good taste. A few oak chairs in solid wood or leather—no plush. A center-table of oak with a couple of good magazines on it and a light so that a waiting patient may read. Get enough modest pictures to break the bare expanse of the walls. I'll send you a couple.

Carpet your operating-room with linoleum. Put in a good chair, spittoon and cabinet. You already have your operating tools. Keep your office clean. Cleanliness is next to godliness in morals and next to prosperity in dentistry. You'll probably have to do your own sweeping and dusting. I presume your acquaintance with a broom

has been pretty distant heretofore, but you want to get well acquainted now. If you don't like the

I found dry rolls and bologna, eaten behind the office screen, pretty monotonous before I had money enough to do better.

broom console yourself with the thought that every intelligent motion you make with it, is a move into the respect and confidence of some eagle-eyed

woman who will talk you into a practice if your office is clean, and talk you out of a practice if it is dirty. Keep your laboratory as neat as your reception-room, so a patient may be taken in at any time. A clean laboratory, shown to patients, is a mighty good ad.

And now comes the vital question. How shall you get patients? Well, after seeing the results of nearly every known method, I want to counsel the time-honored method of getting them by "mixing." Yes, I know it's slower. I know it a good deal better than you do, because I remember mighty well the days when I had only money enough for one square meal a day, and the other two were made up of 5 cents worth of rolls, 5 cents worth of bologna and copious draughts of cold water. But I "mixed" and waited and I had reason to be glad. A good mixer needn't wait long.

If you've got good business sense, you will be your own most attractive, persuasive, winning advertisement. Your education, common sense, manners, dress and habits are all waiting to talk for you in the most effective manner, if you'll take them among people and give them a chance. But

they can't talk to people till you carry them where the *right sort* of people are. They'll win for you the people that no widespread printers' ink could win; and when you get these people, they're better worth having.

### AS TO FEES

Here your business sense comes in again. Of course you value your services highly. I know how it was when I left college loaded down with extensive and accurate knowledge, I just ached to unload at so much per load. Don't make your prices too high, because that'll keep you waiting too long, and I found unbuttered rolls and bologna, eaten alone behind the privacy of the office screen, pretty monotonous before I had the money to do better.

But, on the other hand, don't make your prices cheap. Keep them about even with the prices of the really good dentists of the community. Talk your patients into good work at good prices. Make it a rule to know, when you begin work, just when you are to get your pay. It saves endless discussions and hard feelings, makes patients respect you and builds a wall between you and the

Poorhouse. I wish I'd known enough to do this when I began.

Only recently I met a white-haired dentist who has $20,000 on his books, much of it not worth 5 cents on the dollar. He hasn't half that much

You've cruised in my boat. Dentistry paid it, but not until I'd learned the few simple truths I'm writing you here.

real assets after a lifetime of very skilful practice. He simply failed to arrange for the pay.

Get your money. It pays. And patients will be just as numerous in the future as your *paying patients* would ever be under any credit system. Also it's easier to begin practice on a "get your pay" basis than to change to it afterward.

Keep your ideals. You've done excellent operative work in college. Keep it up. Don't get care-

less under any conditions. Speed will come with practice, but don't hurry now. The early days of practice will build the foundations of your future success, half success or failure. Build them for success, big success. Any man of ordinary professional and business sense can do mighty well, financially, in dentistry if he will pay the price. And part of that price is in patient well-doing.

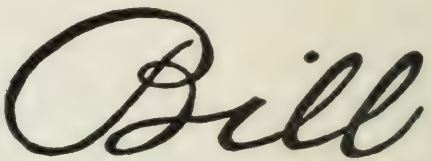
Maybe these hints sound old fogyish. You may think "Uncle Bill graduated over twenty years ago; times have changed; he doesn't know how it is done now." Well, you've been at my house and office; you've ridden in my motor; you've cruised in my boat. And dentistry paid for them all and some other things you haven't seen. *But it didn't pay for any one of them till I'd spent years of toil and privation mastering the few simple hints I've written you here. They made it pay.* And if I'd known sooner what I'm telling you, they'd have made it pay long before it did.

The "times haven't changed." People are just the same as when I was your age, only more so. There is more culture, more money, more call for the best in every line. And that call for the

best is the call of the money. You'd better cock your ears till you hear it clear and plain.

If you follow these hints and get down to the rolls and bologna stage let me know. But really, you'd be a better man if I let you fight it out alone.

Your interested uncle,



BROTHER BILL ATTENDS A DENTAL MEETING, AND WRITES PRETTY EMPHATICALLY ABOUT "HOT AIR AT DENTAL MEETINGS."

## LETTER SEVEN

DEAR JOHN: I've just returned from an evening at the local dental society. I wanted very much to go to the theater, but Dr. A—— was to address the society. I've never met him, but I've heard his name for years, usually coupled with praise. So I denied myself the theater and got to the meeting on time.

There were about 150 dentists there, some of them with national reputations. I was very glad to meet them. They seemed like fine fellows.

After a few preliminaries Dr. A—— was introduced. He unfolded a goodly roll of manuscript and we settled ourselves for a treat. What do you think? He spent forty-five minutes developing these facts:

*First.* That he believed cement made quite as good an attachment to the cavity side of a porcelain inlay which had not been etched, as when the inlay had been etched.

*Second.* That before setting a porcelain inlay it was his custom to warm it to body tempera-

ture. He believed the attachment of the cement was strengthened thereby.

Without noticing the accuracy of the facts, just think of the mountain of hot air he built about those two little statements. After a few minutes I simply *couldn't* pay good attention. I looked out of the corners of my eyes and found others doing the same. And I wished heartily I was in the seat I had selected for "The Music Master."

You know I believe in dental societies, that I work earnestly for them and that I invite every new dentist who comes to our town to join.

You know I believe in having papers. The information which a well-grounded, plainly stated paper affords is inestimable. It becomes part of the theory and practice of many men. It is one of the tiny wavelets by which the tide of good dentistry advances. It is because of such papers and the collateral work of the men who give them, that dentistry is so far advanced in America. And those who love the profession should watch with jealous eyes for any falling off in the quality.

The more I attend meetings the more I feel the urgent need of reform in many of the papers presented. They contain too large a proportion of

hot air to the amount of real, practical information. Around a mustard-seed of truth some one builds a mountain of words. Many authors feel that a paper should be constructed as follows:

*First.* A preamble of pleasing form. It is not expected to contain any facts or much sense, but it must be a literary gem. (It is generally much too long.)

*Second.* A mustering of the grounds for the paper. (Save with our best authors this is usually too long also. It frequently embraces much irrelevant material, and it often shows compilation of matter by recent re-reading of text-books.)

*Third.* The fact or theory the author wishes to establish. (This is the real heart of the paper. Only too often it is not sufficiently developed. Perhaps this is because the author has consumed so much effort on his introduction and groundwork, that the fact or theory no longer rears its head far above them, even in his own thought.)

Lastly comes the conclusion frequently accompanied by apologies for the paper.

This sort of a paper is not fair to the man who presents it or those who listen.

Most of the men who furnish papers for societies are much above the average in their time and place. They are usually good practitioners, at least in their favorite branches. In their own offices I find them sensible, modest, ambitious dentists, largely free from foolish pretense. They have the good of the profession so at heart that they are willing to put in extra labor without financial reward. How great would be the profession's gain did they but grasp the value of being merely themselves when they occupy the time of a society!

I believe the men who listen to the papers at society meetings are, without doubt, the best men among the membership. They are the most eager to receive new light and the most willing to work it out into accomplishment. Their time is valuable, too, and it should never be wasted. Yet an audience of such men is frequently compelled to sit for an hour or more to learn facts which could easily be stated in five minutes.

Now let me give you a few pointers that may save your reputation some time. Without regard to the accuracy or reasonableness of whatever facts you may offer, such long-windedness works harm in three directions.

*First.* It lowers your reputation. Many subjects require considerable time for intelligent presentation. It is also necessary to make very plain the grounds for any radical innovation. For such papers ample time is willingly granted; but for a paper built on so slight a foundation as that mentioned above to occupy more than a very few minutes injures the standing and influence of him who reads it.

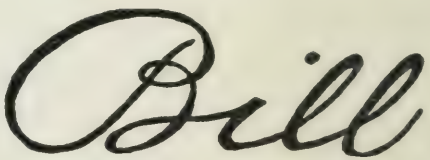
*Second.* It is unjust to the men who assemble to listen. The time occupied by this paper was worth a good deal of money, and many of these men needed it for relaxation. They didn't get even that. If you can get any relaxation listening to a paper that makes you tired, you can do more than I can.

*Third.* Such papers do much harm to the cause of organization and society work among dentists. Only a small proportion of graduate dentists are members of societies. And there is only one way to gather in and keep any great percentage of the outsiders; for it avails little to gather them if they are merely nominal members with slight interest and rare attendance. The only way to keep them is *to make the meet-*

*ings so interesting and profitable that they will see their own profit in being present.* This is what the officers of the societies are trying to do. When the members realize that practical information, such as every member possesses concerning some portion of his practice, is the valuable contribution, one step in advance will be made. And when contributing members are convinced that the literary form of the contribution is not important, so the matter be sensibly put, a new day in society papers will dawn.

I'm glad you're doing society work. Help all you can. But don't get a reputation for delivering "hot air."

Yours,



BILL LISTENS TO SOME DISCUSSIONS AT A DENTAL MEETING, AND GETS VERY TIRED.

## LETTER EIGHT

My Dear John: I'm so tired you ought to be able to see my shoulders droop clear from where you are. No! I haven't been working hard—it's worse than that—much worse. I've just returned from an evening at the Dental Society, and they've been discussing papers. I don't know how much of a sinner I've been in the past, as a discusser, but all my sins have come home to roost. As I look back at some of the discussions at our local society through the glasses of this evening's experience, I guess some of them have been pretty windy. But I've been sort of half daddy to that particular society for ten years past. And I guess I've just sat and purred, like a well-fed tabby, through a good many meetings that would have been greatly improved by dissolving a few more ideas in the sea of words.

We had a fine paper by a really big man. There was no dress-suit fussiness about him and no prelude of foolish excuses. He knew his subject; he had put in a lot of hard work to get it in shape for us, and he gave it in fine form; not a necessary

fact left out; not a foolish fact in; and not a word wasted.

As we sat waiting for the paper to begin, I looked around the audience and what I saw made me feel mighty comfortable. It is a big meeting and some big men are here from far away I recognized Dr. A——, who must have come 300 miles, and Dr. M——, who came at least twice that far, and many other men of note. I thought, "What a tribute it is to a man and a cause, when so many men of note will assemble to honor him." It makes me smile now that I've had my "seein' glasses" on a whole evening, to think I could have been so simple. Bless your heart, John, those men weren't there to honor B—— or his paper. They were there, waiting for chances to jump into the lime-light at the earliest opportunities and stay as long as possible; they attended to get themselves called on; to hear the sweet sounds of their own voices; and to appear in print afterward. But I didn't know this early in the evening and I wholly missed the significance, when, just as the president rose, Dr. M—— softly tiptoed from a front-row seat, clear across the front of the audience, and out at the side.

The subject of the paper was "Simple Prophylactic Measures for Children." I enjoyed every line of it. It contained some good, new things and a lot of old ones made plainer. And it left fine suggestions for those who were to discuss it.

When the applause subsided the president called on Dr. A—— to discuss it. I've always wanted to hear this man speak; I wish now I never had heard him; then I could keep my admiration for him. He started in very modestly and sensibly, but soon the sound of his own voice grew sweet to his ears. So he just detached his brain and let his mouth run on, while he listened. And it ran everywhere. In five minutes he had left the course laid out and was off over chemistry, bacteriology, operative dentistry, prosthetic dentistry and surgical treatment of infant diseases. He didn't say anything on any subject, just touched it in a light, airy way to show he knew something about it, and passed on. Finally, after twenty minutes talking, he rang the bell on himself, switched his brain into the circuit again, and with a single pertinent remark on the paper of the evening, sat down.

He was the first one and we weren't so tired then, but I was getting my eyes opened. I haven't

any "half-daddy" feelings toward this society and I didn't sit and purr as I would have done at home. So I observed pretty closely. The next man spoke about twenty minutes, in excellent sense. He was there for the paper. He had profited by it and he wasn't talking to hear himself. It was like a delightful breeze on a hot day. When he was done he was applauded in a way that meant something. The next three men were full of words, words, words. They didn't come to hear papers, or to benefit the society, or anything else like that. They came to get a chance to talk. And when each got it, he talked till he ran down.

Right next to me sat a big, strapping, Canadian with a good face and pleasing way. As this river of words flowed unendingly past, he got more and more restless. He had about as choice a private collection of names and swear words as I've heard in quite a spell. And he kept up a running fire of comment on the speakers that I enjoyed immensely. Finally, when the fifth man had sat down, he couldn't stand it another minute. He popped to his feet, shook a long arm at the president and fairly bawled, "I've come four hundred miles and given a week's time to attend this meet-

ing. I've heard a good many words, but mighty little sense. It's be damned if you do, and be damned if you don't. Now, I'd like somebody to settle something."

"I've heard a good many words, but mighty little sense. Now, I'd like somebody to settle something."

It was just what we all needed, and we stamped and clapped and stamped again.

Yet right after this the president made the biggest mistake of the evening. During the last two

or three minutes of the paper Dr. M—— had tiptoed across the front of the hall again to his front row seat. The president knew him to be a man of reputation and felt that he ought to be called on to speak to the paper. (I've done the same, but shades of George Washington! I never will feel that way again about a man in that class.) So in a few neat words of introduction, he asked Dr. M—— to speak on the subject. Well, John, when he rose, buttoned his evening coat, threw out his chest and struck an oratorical attitude, it all came over me in a flash. The away front seat, the tiptoed exit when he was the only moving figure in the hall, the studied return under the same conditions, were as carefully arranged and theatrically executed as the moves of a real prima donna. And I knew he wasn't there to honor B—— or his paper or the society; but his sole aim was to aggrandize M——. His talk proved it. He referred to the title of the paper and its honored author and then launched out on his own lines. He told about *his* travels, *his* investigations, etc. He described the differences in the teeth of the Irish, Scotch, English, German, French, Italians and Americans as *he* had studied them in their

native haunts. There seemed to be no end to it. Even the president got nervous and with many apologies, ventured to call the speaker's attention to the subject of the evening. He said "Ah! yes, I remember," and then launched out on a twenty-minute discussion as to whether pyorrhea is systemic or local. He was finally turned off just in time to save some of us from nervous prostration.

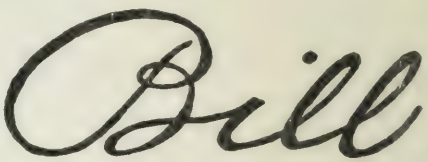
As I said before, I'm tired out, but I've gained more light on the subject of discussers than I ever had before. They're divided into two groups. One of them is composed of modest, hard working, conscientious dentists who have the good of the cause at heart and who prepare a paper for the good it will do, or discuss it from the same viewpoint. They are the heart and life of every society. Sometimes they're not easy speakers, but that makes no difference. They should be helped and developed and given their share of honors.

The other group is composed of men who are naturally fluent speakers. They are so coddled by every presiding officer, they are called on so in season and out, that it sort of goes to their heads. They get to love to hear themselves talk; and then it's all off.

When next I preside at our society there'll be some fun. I'm going to keep D—— and O'B—— and H—— sitting down if I can. I can see through them now like I can through a ladder. And if I can't keep them down, I'm going to gently but firmly show them the limits of the evening's discussion; and if they jump the fence, I'm going to yank them back right then and there, and we'll have a meeting that night anyway.

I'm happy over what I've learned, and wherever on this trip I meet a dentist who is, or is likely to be, a presiding officer, I'm going to show him how to diagnose these "talking machines" and shut them off. He needn't be afraid of their feelings; they're like paper in our range stove; they'll put his fire out; and the less he has of them the better off he'll be.

Yours sleepily,



AS A RESULT OF HIS EXPERIENCE, BILL MAKES SOME SUGGESTIONS AS TO THE PREPARATION OF PAPERS FOR DENTAL SOCIETIES.

## LETTER NINE

My Dear John: Your letter, written after my letters relating my experience at the dental society meetings, where I heard the paper and discussions, came yesterday. You say that while my objections to "hot air" in a paper are well taken, not many men can write a paper at all, and the society is usually thankful to get papers on any conditions, hot air and all.

You say that you've been asked twenty times to prepare a paper, when everyone knows you can't do that sort of thing. You're partly right and partly wrong in what you say.

I didn't mean that every dentist could write a polished essay, à la Addison, full of beautiful thoughts beautifully stated. That isn't what we want at all. We want dental information, put straight, either in smooth sentences or rough ones, just so it gives real information. Sometimes I get mighty tired of smooth, finished essays, where one sentence rounds into another so nicely that nothing

sticks out by force of worth. Men don't talk that way; and once in a while a man who writes just as he would talk is very welcome.

There is a widespread idea among dentists that they can't write. Most of that impression is dead wrong. And it is doing our societies a good deal of harm. Of course they can't be brilliant essayists and great research men and all that. But no one wants them to be. What we want is commonplace things presented from the other fellow's viewpoint. And every once in a while one of these things becomes *uncommonplace,* and we are all benefited thereby. A fact has as many sides as a diamond. And people see it from innumerable angles and get slightly differing reflections. It's the other fellow's reflection of that fact we want.

Now there is nothing mysterious or wonderful about putting it on paper. And 50 per cent. of the men who decline to prepare a paper for the society could readily do it if they got their mental obstacles out of the way. They don't think of preparing a simple paper, but they immediately think of Black and Johnson and others, and say: "Oh, I can't write." Maybe they can't send their names

"sounding down the corridors of time," but they could prepare a practical little paper for their local society that would do good to many.

I am going to show you, by a simple practical example, that any dentist who can write an intelligent letter can write a paper *about things he knows* and make it of practical value. In fact, he cannot start in any better way than to write it as a letter to someone, real or imaginary. A very few changes will make it into a paper instead of a letter, and it will be all the better for any personal touches which the letter contains.

A successful letter to a friend requires, of course, that the author know what he is writing about and that he stick to his text. If he writes about what he only supposes or imagines, he cannot prepare a valuable paper. Its lack of firm foundation betrays itself in numerous ways, and usually earns, for both the paper and the author, much less appreciation than a less ambitious paper with a stable foundation of knowledge.

Take so old and story-worn a subject as the treatment of putrescent pulp canals. Let us suppose that John Doe is a practising dentist. He is one of those society members who rarely or never

takes active part. But he hears and tries to digest what is offered his society.

A certain dentist addresses the society on the subject of "treating putrescent roots." He offers some ingenious and complicated methods requiring certain delicate instruments and extraordinary manipulation. Dr. Doe listens attentively. In the silence of his own mind he has studied root treatment in the light of all he could read or hear. And by patience and simple methods he is saving 97 or 98 per cent. of all the roots he treats. On his return to his office he writes his brother as follows:

MY DEAR BROTHER: Dr. Blank addressed us this evening on the subject of treating putrescent roots. I fear you may be unduly influenced on reading his paper, and want to say to you right now that such complicated methods are entirely unnecessary.

There are only three things to be accomplished in treating putrescent roots. They are:

*First.* To get out the infected dentine in the pulp chamber and canal and sterilize both.

*Second.* To so stimulate the circulation as to

remove infection at the apex and establish tissue repair.

*Third.* To completely fill the canal with an agreeable and, if possible, an antiseptic filling.

Unless the tooth is in a state of acute abscess, never enter any canal in which the pulp is dead, during the first treatment. If you do, you are almost sure to cause an abscess. Clean out the pulp chamber with sharp instruments, carefully avoiding the least pressure on the canals. Fill the chamber with cotton soaked in a strong germicide (I use oxpara fluid), and let it remain twenty-four hours. If no pulp chamber remains you must clear out the chamber end of the canal. But do it carefully. Do not make pressure on the dead material in the canal, or you will force some through the apex and cause trouble. After twenty-four hours soaking in the germicide, you can remove the dead material safely. Put on the dam. Take Kerr broaches which cut on the side only (avoid the very fine sizes), and patiently ream that canal as nearly to the apex as you can possibly get. And patience will usually take you a good ways. Then put in your root treatment. I use oxpara fluid and

powder mixed thin. Let it stand two or three days. At the next treatment, if the tooth has been only a trifle sore to touch, you can probably fill the root and the tooth if you desire. To fill the root I merely soften the oxpara in the canals, work up a thicker mix of the same, and push a gutta-percha point up as far as possible.

By following these simple steps carefully I do not lose more than two roots in one hundred, so far as I can tell. Yours,

JOHN.

Such a letter forms an excellent beginning for a paper. As the members of the society are not so likely to be familiar with his technic as the brother to whom he writes, he may go over it and fill in the details of his method. He may show the advisability of thoroughly cleaning the tooth to be treated, and at least those immediately adjoining it, as the first step of treatment. He may emphasize the use of the dam to keep out saliva; also the use of sterile instruments. He may describe and exhibit the instruments he finds most useful for cleaning the pulp chambers without making pressure on the canals; he may tell how he gets access

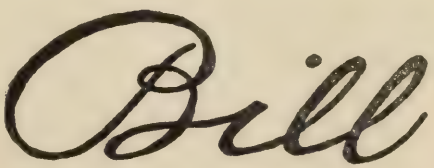
to different canals, and he can work in all these points merely by rewriting the letter in more detail.

I wish I could root out of dentists' minds the notion that they cannot help effectively in societies. The society is as good as its members make it. It is not made by its officers and the little handful of men they are compelled to call on so frequently.

I know you can prepare a paper if you only think so, because you've just written me an intelligent letter and said pretty nearly what you wanted to say. Now write me or some one else a letter on fillings, or prophylaxis, or cavity preparation, or handling patients, or collecting accounts, or some other subject you know about. Don't try to write a great paper or a smart paper, or any other kind except a plain, sensible statement of fact.

And with practice in doing this will come the ability which may some day, when you are older and wiser, produce a really great paper.

Try it when you're asked. Pull at least your own weight.



BILL LISTENS TO A PAPER BY A FELLOW WHO THINKS MONEY MAKING IS NO PROPER PART OF DENTAL SUCCESS, AND GETS STIRRED INTO THE DISCUSSION.

## LETTER TEN

BUFFALO, N. Y.

MY DEAR JOHN: I had my innings last night all right enough, and I've been divided between amusement and mortification ever since. I attended a meeting of a local dental society, and a chap read a paper on the subject of "Successful Practice." He was a pleasant appearing chap with a thin, intellectual face, and when he rose to speak I was reminded very strongly of Dr. McB. Well, sir, he hadn't been going more than ten minutes when he hit on one of my raw spots, and from that time on he hit them on an average of once a minute.

I enjoyed his paper until he took up the financial side of practice. I knew in a minute that he didn't know anything about a successful practice, and probably never would. He said that in estimating successful practice the money which is made should not be considered; that a practice might bring in large sums and not be successful, which, of course, is true; and that it might be successful in the highest degree and still not be highly remunerative,

which, of course, is not true. He wouldn't have put it so inelegantly, but it translated itself to my mind like this, "that if you've done a good grade of dental work and arrive at old age with no means of support and without physical ability to longer earn your living, you've been successful." I noticed that very few were giving him any interested attention, the others seeming to pay him attention merely in a polite way. In fact, I don't believe anybody else gave him half the attention I did, because I wanted to get up right then and there and tell him a few things I'm sure he didn't know.

At the close of his address, the presiding officer rose and uttered a few neat words, which he probably didn't mean at all, but which had been carefully prepared to make the essayist feel good. One or two dentists criticised the paper in the usual way, by complimenting the author and then largely agreeing with him. I felt sure that one of them didn't really approve of the paper, and didn't wholly mean what he said in approval of it, but he did not have quite courage enough to come out and cross all the society traditions by saying the things he really believed. When the second critic sat down, the presiding officer threw the paper open

for general discussion and here's where I got into the game.

After waiting a minute or two to see that nobody else was ready to say anything on the subject, I got recognition from the chair and opened my remarks in a mild way by saying that the paper of the evening was lopsided, that it had left out some of the most important elements of successful practice, which I should be pleased to call to the attention of the meeting, and that it advocated a wholly mistaken and wrong idea about the financial side of practice. Well, I hadn't gotten any further than this, when every man in the room was sitting up and taking notice. I saw a smile go round, but that didn't stop me any because I knew just what I wanted to tell them.

Then I told the society about Dr. McB——, of whom the essayist reminded me strongly. I told them about his excellent moral and religious character, his courteous manners, his excellent qualities as a parent and father. Perhaps I drew it pretty strong right in here, because I was working up to a contrast which I wanted to make as effective as possible. Then I went on with a description of his professional ability, his extensive knowledge, his

unusual technical skill and his conscientiousness. You know him well enough to know it would be pretty hard to exaggerate these things, because he certainly is a wonder in these ways, but I stated them for all they were worth; this was the top of my grade and from here I started for my climax.

I painted an accurate and detailed picture of his financial conditions. I told how entirely lacking he was in business-getting ability, how few were his patients, how much too low were his fees compared with what they should be, and how cramped was his own life and the lives of the members of his family. I mentioned the two daughters who are teaching, and who are so strongly suspected of having to help support the family. I told how few were the family pleasures, as we estimate pleasure to-day, without travel, without vacation and without even the home luxuries.

Then I related how he had been doing skilful dental work for over twenty-five years, that he was now past his prime and that his practice could never be any bigger than it is; but that it must grow less and less as he becomes physically infirm. I closed this part of the talk by asking them, "Is the dentist successful who has conducted a highly

skilful practice all these years, who has reaped from it almost no material benefits for himself or his family, that a clerk in a store could not provide, and who faces old age and physical infirmities, with no savings and no assured income?"

I didn't give them a chance to answer this, because I wanted to answer the question for them myself; and I went on to show that there are two parts of dental practice, the professional side and the business side, and that practice is not broadly successful which is not successful in both. I agreed heartily with the essayist that practice is not successful simply because it makes money, but I denied positively that a practice was successful which did not provide comfort in the present and plenty for old age. I insisted that a dentist who completed a normal period of practice without having provided for himself and his family in the future, unless some catastrophe made this impossible, was a failure, and that no professional etiquette or courtesy of speech could cover it up.

Right here I happened to glance at the essayist of the evening, and saw that he was red in the face, and seemed to be covered with mortification. I decided right then that I had said too much,

and with a closing word or two, sat down. When he rose to close the discussion he seemed to find it somewhat difficult to speak, but said he felt called upon to differ with the last speaker, because he believed that the finances of a dental practice had nothing whatever to do with its success. He believed that success was dependent absolutely upon the degree in which the dentist was true to the best traditions of the profession and the care and skill with which he served his patients. Also that financial returns were so far secondary that they should not be considered.

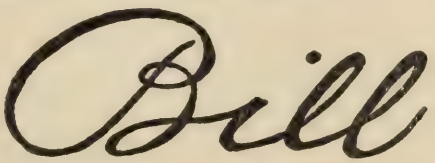
On the way home, I found out from my host, who had taken me to the meeting, what made the essayist red in the face. It seems that in describing Dr. McB—— I had described that man to a "T." Of course I hadn't meant anything of this sort; but there are so many of these chaps in the profession that one is liable to run onto them anywhere.

I wish I had some way of blazoning from one end of this country to the other the fact that the practice which is not financially successful is only half successful. I do not mean that merely making money is a sign that a practice is successful; not at all. But I do mean to say that the practice which

does not provide the dentist and his dependents with comfort now and protection in their old age is a failure, no matter how skilful the operator may have been. The notion that a dentist must live and die poor; that he should get along on a day-laborer's hire, or the wages of a clerk; that he is not entitled to pleasures and even luxuries, and that he should not provide himself with plenty for the future, unless something beyond his power prevents, is all foolishness and is all dead wrong. I know these things are not so, because every once in a while I meet some dentist who has waked up to the importance of the business side of his practice and is making himself independent, not by the exercise of unusual ability, but merely because he has used his financial common sense.

I'm sorry I hurt that chap's feelings, but I know that it's a good deal more pleasure to practice dentistry when you can see the bank balance increasing annually. And I believe a dentist who is making money has more heart for good work than one who is not. That's my experience anyway.

Yours,



## BUSINESS BUILDING ARTICLES

THE FOLLOWING ARTICLES, WITH OTHERS ON THIS SUBJECT, WERE PRINTED IN *THE DENTAL DIGEST* IN 1909. THEY ARE REPRINTED HERE BECAUSE OF THEIR GREAT PRACTICE-BUILDING VALUE.

# PROFESSIONAL BUSINESS

FREDERICK CROSBY BRUSH, D.D.S.,
NEW YORK CITY

THE publication in the *Dental Brief,* during 1907 and 1908, of the articles on "The Application of Business Principles to Dentistry," seems to have opened for discussion an essential phase of everyday dental practice—yet one that has been touched upon both lightly and sparingly by writers on dental subjects in the past. The reason for this shunting aside or avoidance of this very important subject will probably be found due to the petty jealousies and secrecy with which the older practitioners were accustomed to surround anything that pertained to their income or fees. And a good deal of this spirit has been handed down from preceptor to student for so long that it is looked upon as almost a desecration of hallowed ground for a man to attempt to bring about an open discussion of such subjects and to ask another man for a

frank statement of his business methods. For some years it has been quite the popular thing to discuss the raising of the standards of the profession by increased requirements in the theory and practice of operations; but for a man to dare to suggest that a more practical means of elevating the profession in the minds of the laity would be by standardizing the business principles upon which the practice is conducted, has caused him to be looked upon as a daring adventurer into forbidden territory, and one unsafe to follow.

The series of articles referred to seems to have touched a responsive chord in the minds of some, however, for letters of inquiry, commendation and criticism have been received from all over this and other countries. The editor of THE DENTAL DIGEST has foreseen the awakening, and is to devote a department in his publication to the discussion of the business side of the profession. In my contributions to this department I shall not attempt to observe any sequence in the consideration of the subject, but will take points, hit or miss, as they come to me, or as some inquiry shows that emphasis on some particular point is necessary. Just now there comes to mind an incident that

occurred recently and, I think, can fittingly be discussed under the heading

*Rendering Professional Services*
VS.
*Selling Materials.*

We were discussing gold inlays and the best means of determining the amount of the fee for such an operation, and the doctor said: "My patients are only accustomed to paying from three to five dollars for gold fillings. In exceptional cases I can sometimes get seven or eight. I have to keep up to date, of course, and have taken up gold inlays, and I find by doing the casting at night, or when not otherwise engaged, that I can put in more fillings in a day; and that out of a nugget of gold costing about two dollars I have been able to make three or four fillings, so I figure I am making a good profit on my gold and that I am making more money than I would if I charged by the hour."

On the face of it, the doctor's story sounds good; but let us stop and analyze it, and see if his way of reasoning is in accordance with good logic and judgment. First, if he is simply selling material

in the sense of acting as a middle-man for the sale of gold, and is able to turn over a nugget of gold, costing about two dollars, by cutting it into several pieces, and thus receiving from ten to fifteen dollars for it, then he is certainly doing a good business at a good profit.

But if he is a professional man who has expended many hundreds of dollars and has devoted several of the best years of his life to acquiring such knowledge and skill as will enable him to render his patient a satisfactory service, based on good judgment, and, furthermore, is under considerable continuous expense to maintain a suitable office and equipment for the performance of that service; devotes time to a perusal of the latest books and journals; the attendance of the meetings of his local societies, so that he may keep abreast of the times and his patients may feel that his decisions are in accordance with the latest authorities upon the subject, then comes the question—how is he to be recompensed for all this expenditure of time, energy and money?

Let us follow through a typical gold inlay operation and see just what is involved. First, we will consider that all the necessary equipment is at hand

and that a certain amount enters into the yearly expense account for the upkeep of instruments and furnishings. The patient arrives, and good judgment determines that a gold inlay is required. The cavity is carefully and thoroughly prepared along the generally accepted lines, as laid down by Dr. Black. The matrix is made directly from the cavity or by the impression method; this has occupied one-half hour, it being a moderate-sized cavity and easy of access. The next stage is purely mechanical, and consists of investing, casting, finishing, etc. The filling is weighed and found to contain gold to the value of about eighty cents. The patient returns, and the inlay is cemented to place and properly polished; this consumes another half hour of operating time.

Now comes the problem of what to charge for it. We know how much the gold is worth, so we put that down at one dollar. If the matrix has been sent to a public laboratory to be cast, it would have cost from a dollar and a half to two dollars, so, if the labor of an untrained boy in a laboratory is worth that, surely the time of a specially trained professional man must be worth as much, so we can put the laboratory cost at two dollars. Now

there is still the one full hour spent over the patient at the operating chair to be reckoned with. Did you ever stop to think that you are under continual expense every hour, and what that expense is? Do you know how to figure out what your expenses are for every hour, work or play? Add together the expenses of conducting your practice for one year, including everything—the interest on your investment and what you consider a fair salary for yourself, and divide the total by the number of days that you are willing or able to work in a year; divide this again by the number of hours per day that you spend in your office, and this will give you a very close estimate of the expense you are under every hour, whether that hour is filled by appointment or not. To continue our analysis, we will say that the expense per hour amounts to two dollars, and that in order to be protected against losses and unfilled hours, the cost must be figured at three dollars. We find now that the total cost of the filling has amounted to six dollars, and a fee of at least that amount must be asked in order to be properly remunerated for the service rendered.

Now do you think that the doctor was really

making a good profit on his gold when he sold his fillings for from three to five dollars apiece, or was professional service being rendered by a specially trained and supposedly cultured man for a compensation that would hardly be acceptable to a union workman in the skilled trades?

Are you a professional man, rendering special services to your fellow man for a remuneration commensurate with the dignity and social standing that you should be entitled to? Are you selling materials for whatever profit you may think you are making, or are you just one step removed from the ordinary skilled mechanic, willing to do work for whatever you can get? Which? Think it over.

# PROFESSIONAL BUSINESS

## *Second Paper*

BY FREDERICK CROSBY BRUSH, D.D.S., NEW YORK

In connection with the above title it may be well to again explain that "the exchange of anything for something constitutes *business*" and that the rendering of skilled service, by a specially trained man, for a remuneration constitutes *professional business* in contradistinction to commercial business, which consists of the purveying of goods and chattels. For the purposes of discussion we may arbitrarily divide *professional business* into two distinct parts. The *technical*, or that which relates entirely to the service or operation; and the *business* side, which has to do with the disposal of such technical services and the remuneration to be received therefrom. It is of this *business* side of a professional practice that these various papers are intended to treat.

In some unaccountable way, in the earlier days of the dental profession, the idea became wide-

spread that it might not be considered strictly ethical to openly discuss the purely business side of a practice. In fact it has been quite the fashion for some of the older and financially successful men to rub their hands and, assuming a very grave and dignified tone, assure their young admirers that they never even thought of money in connection with their work, but that their minds were wholly absorbed in the detail and poetry of the operation—and a lot more of such nonsense. The receiving in a dignified way of a suitable recompense for services rendered, is just as much a part of good ethics and entitled to a liberal discussion, as is the detail of any given operation. That there has been but little discussion of *business* subjects in the past is true, but letters from men in all parts of the country indicate that an awakening is taking place and that the importance of a more thorough knowledge of business principles is being appreciated.

This leads to the question, From what source should a young man expect to receive a knowledge of the business principles connected with a profession which he is about to enter? Why, from the college that gives him his technical training, of

course. But do you realize how lax the colleges are in their treatment of this important subject? Has it ever struck you how one-sided their lecture courses are? The professors lecture to the students for four years on how various operations should be performed, but probably not one hour on how to *obtain* or *retain* the patients requiring such operations. Is it any wonder that we have advertising dental parlors and unethical men of all descriptions when every year there is a horde of graduates turned loose upon the public, each one eager to establish a practice and recoup the depleted state of his finances, and with but a faint idea of what is meant by true professional honor, dignity or courtesy, and without any idea that he, personally, is under any obligation to the profession upon which he is entering; and that it has a right to demand that he shall conduct himself according to its accepted code? Generally about all the young graduate realizes is that he is now entitled to enter upon his chosen life work and the sooner he gets about it the better; that expenses are heavy and recurring with deadly regularity, but patients do not clamor for his services quite as frequently as he had hoped; that he must get money or go under.

It then probably dawns upon him that while he has been taught how to render his services he has not been given the slightest idea of how to dispose of them to the best advantage; and without a previous good moral and business training to sustain him, he begins to slip along the lines of least resistance. Many times he does not know that he is violating any of the accepted professional laws until he finds himself ostracized by other practitioners and denied the advantages of membership in professional organizations.

I contend that more men go wrong through ignorance than from inclination; that if men are taught how to maintain themselves respectably they will try to be respectable; that if but one side of a man is developed he cannot be well balanced. If these things are true, our colleges are very largely to blame for the many professional derelicts that society is burdened with. The colleges promise young men a training which will fit them to hold a respected position in society; they accept the students' money and consume four of the best years of their lives and then turn them adrift with a load of superficial technic, but without moral rudders to guide them to port.

This going professionally wrong and drifting along unethical lines, by many men, could be greatly obviated if the dental colleges would establish a series of lectures on matters that pertain particularly to the business side of a practice. Such a course of lectures would be of inestimable value to the young graduate about to engage in the struggle for a practice and a decent living; and would probably guide him straight through many a storm of adversity and despair.

The lectures might cover to advantage such points as the following:

*First.* The choice of a location. How to judge cities and towns and the probable future of a dentist so located. The amount of population considered necessary to support a dentist comfortably. What may be reasonably expected from various kinds of communities in the way of fees, collections, etc. How to select a location for an office in any given community. The value of a proper entrance and approach to an office. The question of light and how it may be utilized to best advantage. Dignified and acceptable signs.

*Second.* The office itself. Various ways of

arranging for a reception room, dressing-room, operating and laboratory rooms, etc. The appointments in general. What to avoid. The operating equipment required at various stages. How to select and arrange the same.

*Third.* The value of an attendant in receiving and caring for patients; the prevention of blackmail and general damage suits; the answering of telephone calls and correspondence; assistance during operations and in the laboratory, etc.

*Fourth.* The personal and social conduct of the dentist. How to make valuable acquaintances and social connections. Church, lodge and civic work.

*Fifth.* The personal appearance of the dentist. The value of a good tailor, haberdasher and barber. The care of the hands. The use of tobacco and liquors.

*Sixth.* How, when and where to advertise. The forms of advertising considered ethical in various communities.

*Seventh.* Business stationery in general.

*Eighth.* Bookkeeping, charts and records. The value of a "tickler" system. The rendering of bills and collection of accounts. Insurance and

how to adjust it. Expenses and how to figure the cost and value of time.

*Ninth.* Office hours. Vacations and when to take them. The advantages and disadvantages of keeping office hours on holidays and Sundays.

*Tenth.* Fees and how to apportion them. The acceptance of the standard of fees maintained by other practitioners or the possible value of disregarding it.

Such a course of lectures could be elaborated, and if delivered before the senior classes just before graduating, would prove of great value and assistance to them in establishing a practice upon strictly ethical and financially successful lines.

To men who have found their niches, with their early struggles almost forgotten and peace and contentment ahead of them, such a course of lectures may seem unnecessary; but if they will pause and recall their own early experiences, look about them and note the condition of their less successful brothers they can scarcely help but realize how sadly such good business training is needed and that in the college would be the best time and place to receive it, *and that all of the colleges should provide it as a part of the curriculum.*

# THE VALUE OF FIRST IMPRESSIONS TO THE DENTIST

FREDERICK CROSBY BRUSH, D.D.S., NEW YORK

HAVE you ever wondered what were the first impressions of a new patient upon meeting you in your office? Are you sure you would like these first impressions to be the lasting ones? Do the surroundings and incidentals that create these first impressions convey just the ideas that you would like impressed upon patients that visit you for the first time?

Just to get out of a rut and get a new viewpoint, suppose you take a little journey with me to some other offices and view them as if we were patients.

This may help us see ourselves more as others see us. And such vision may be very helpful.

The first office is on the second floor of a business block in a small city. At the street door is a cheap tin sign bearing the dentist's name. The paint is chipped off and some of the letters obliterated by the ravages of the weather. We enter

by a long, dark flight of dirty stairs and find the office at the end of a long hall, lighted by one dim gas jet. The reception-room contains a hodge-podge of very old and a few pieces of very new furniture, all in poor taste; on the walls hang cheap prints, lithographs and amateur photos. No provision is made for a dressing-room or a suitable place for a lady to adjust her hair or hat before leaving the office. Personally, this dentist is a capital fellow; a gentleman in every respect. He mingles with the best people in the town; and he never can understand why the people he meets socially will not come to him professionally.

We, as a profession, are preaching hygiene and prevention, and yet how little attention do we pay the subject in our own surroundings; only a short time ago a patient was complaining that she could not continue with her former dentist because the air in his office was so stale and foul with the odors of medicines, and he kept it so hot that she always had a sick headache after every visit.

### RECEPTION-ROOM FURNITURE

It is understood that when you started in practice you could not have just the furnishings and

equipment that you desired; but now that your practice has grown, have you done anything to improve those conditions? You wish, of course, to have the patronage of the best people in your community; that is, the people of refinement, culture and financial means. Are your surroundings such as to attract these people? That you have to spend money to get money is just as true in dentistry as in any other business; perhaps a little more so. Is your office situated in a good neighborhood and easy of access for the people you desire to reach? Is the approach to your office as light and clean as it should be?

Reception-room furniture need not be of the most expensive kind in order to be impressive, but it should be attractive, in good taste and in perfect order. There is nothing quite so shabby as an upholstered chair that has a broken spring and frayed-out trimming. What have you on the walls of your reception-room? One good painting, water color or etching, is worth a room full of cheap prints in gaudy frames. It is quite true that your patients come to you for your *work* and not to see your art gallery; nevertheless, they are quite apt to form their opinion of you from the taste

you display in your surroundings. Above all things, don't hang on your walls an oil or crayon sketch of yourself, made when you wore hair on your face and thought yourself quite a lady-killer, or one of your wife, wearing an impossible gown and a smirk on her face; it's bad taste and worse art. How about that stuff on the mantel-shelf? Does it not look like the vintage of about 1871? And what a dirt catcher! You couldn't handle a piece of it without soiling a pair of dirty gloves.

Don't wait for the scrubwoman to break it; throw it out *now* and get one or two pieces of plain, artistic bric-à-brac (or nothing), and then see that it is kept clean.

How about your reception-room table; is there anything on it that a patient can pick up and be interested in while waiting for you or the friend that is in your chair? I called on a specialist a short time ago, and on the table was one copy of the *Literary Digest* nearly a year old, and with the cover torn off and some of the leaves missing, and I was expected to wait nearly a half hour. Interesting, wasn't it? I didn't wait; I wanted a man that was more up-to-date in all things. Last week I was in a physician's office where the table was

piled high with magazines, a large variety, but the complete numbers for over a year back. One condition was about as bad as the other. A few of the latest issues of high-class magazines would be far more acceptable. When selecting them, remember that your patients are apt to judge your literary tastes by what they find on your table. Don't forget the children; a few pretty books, like the Beatrice Potter books, for instance, will go a long way toward relieving the child's fears on a visit to your office.

Have you a dressing-room with its necessary conveniences for the ladies? Without doubt the largest part of your practice is with women, and they certainly do not like to leave your office without arranging their hair and hats, etc., nor do they like to do this in a public reception-room before other women or possibly men. A separate room or a well-arranged screen or curtain should be provided for this purpose.

### THE VALUE OF PERSONAL APPEARANCE

How about your own personal appearance in your office? I was in an office a few days ago where there were two operators, and both busy at

the time. One had on a smoking-jacket. Nothing short of a bath-robe could be more inappropriate for a surgeon to wear while operating. The other had on his street coat. Do you want to rub the dust and dirt from your clothes into your patients' heads or have the grease and stains from their hair upon the sleeve of your coat when you appear in public? Take your choice; either condition is bad enough. The most sensible thing to wear and what has been adopted by high-class men generally, is the white duck coat with a standing military collar and without any pockets or buttons to catch in a patient's garments or about the chair while operating; and, above all things, change often enough to have it always *clean*; every penny saved on laundry is a dollar lost in self-esteem and appreciation by the patients.

While we are on this subject of personal appearance, let us consider a few things. Have you ever realized that a clean, smooth face or *closely* cropped beard is a financial asset? At a dental meeting some time ago a group was discussing *success* in dental practice, when they were joined by a young man who announced that he was trying to be the best dentist in his community, get the

highest fees, and have the best people for patients, and yet he could not succeed; in fact, the very people that he wanted to retain were the ones that were leaving him and going elsewhere; he asked for an explanation of it. The answer was to turn him about to a mirror and direct him to examine himself critically. He had not shaved that day and his beard showed plainly. His collar was soiled and looked as though it had been worn several days. His necktie was threadbare. While his clothes were of good material, they were poorly kept, not properly brushed or pressed, and showed many spots. His hands were a sight to behold; the grime of the laboratory ground into them, the finger-tips scarred and frayed from knife-cuts and coarse work, the nails rough and dirty. He was asked if he thought any refined human being, especially a sensitive woman, would care to have such looking hands near her face, to say nothing of coming in contact with her mouth. He was inclined to resent these criticisms at first, but he afterward realized that they were well-intended. He profited by the experience, and has prospered accordingly.

The question is often discussed whether it is good taste or advisable to make a display of diplo-

mas in an office. There are many view-points that may be taken on this question. One is that your diplomas are your credentials showing that you have had the requisite preliminary education, and have earned the right to be in practice, and, therefore, have a right to the confidence and esteem of your patients. Strangers placing themselves in your hands are entitled to know your credentials, and if they are where they can be seen it helps to inspire confidence in you. But the place for them is not in the reception-room, but in the operating-room or over your desk. As they represent your *right* to practise, just as your instrument equipment represents your *ability* to practise, they should be together.

Above all things, keep a maid in your office. No man whose time is worth two dollars an hour should be spending it doing things that a maid could do for five dollars a week. And this is an impression that patients have first, last and all the time.

# COMPETITION

FREDERICK CROSBY BRUSH, D.D.S.,
NEW YORK CITY

THE difference between competition in commercial life and in professional life may be summed up about as follows:

In commerce, a man strives to produce a better article for the same price, or the same article for a lower price, which he may be enabled to do by a closer attention to details, thereby lessening the cost of production and distribution or increasing the output. But there is always figured into the cost a proportionate amount of the salary account and into the selling price a percentage to cover a profit and loss. When the cost of production has been reduced as low as is practicable, competition along that line ceases and a generally recognized cost price becomes established. Thereafter competition is *upward,* each producer striving for a better article for a higher price; but the selling price is always based on a thorough knowledge of the cost of production and distribution, and a

suitable allowance for probable losses and a fair profit.

In a profession, competition usually consists of learning the minimum fees that have become customary in the place where one locates and then endeavoring to obtain a *clientèle* by accepting such fees or less, very frequently less. These fees, which correspond to the selling price in commercial business, are established without any knowledge of the actual expenses involved in an operation, with no suitable allowance made for profit and loss, and no thought of figuring on a suitable salary or income for the operator. If at the end of some stated period there happens to be any cash left after the pressing bills are paid, the professional man proceeds to delude himself by calling it profit, and he and his family exist, we won't call it living, on this amount, whatever it may be and however it varies. If the man happens to have good breeding, a favorable address and gets in touch with people of some financial means, he may find it easier to get established and have a little larger cash surplus than his neighbor, but the methods underlying the conduct of his practice will be identical with those of his less fortunate brother

and absolutely faulty from a logical or an ethical business standpoint.

When a dentist purchases supplies from a dental depot he finds that the price of each article has been fixed as a result of an accurate knowledge of all the details connected with the cost of the production and distribution of that article; but when he, in turn, disposes of that article, to which a certain amount of his knowledge, skill and labor have been added, he fixes the cost to the patient by what he guesses it may be worth or by what he thinks the patient can or will pay.

In other words, competition in commercial life is based upon definite business principles, which should underlie all transactions; while in professional life it is based upon the willingness of one man to accept less than another. But, some men will say, the same principles that apply in commerce will not do in a profession. Only another way of saying they don't know how, that's all. The principles that should underlie all business transactions are as fixed as the firmament, but if a man has not the knowledge of them or the courage to apply them, that is another matter.

Recently there came to me a young man seeking

information and advice on how to conduct the business side of his practice. He was a clean-cut, wholesome fellow with an attractive personality; in fact, just the kind of a chap who would be picked out as one likely to succeed. He graduated about seven years ago from one of the Western universities and returned to his native place, which is one of the largest and most delightful home cities of the Middle West; where, owing to family and social connections, he was enabled to at once establish a family practice. After a time his parents built a new home in a still more desirable neighborhood, and into this house was incorporated a suite of offices that are as near ideal as one could wish. In a short time his practice had grown until he was busy from early morning until late at night, and, as many of the patients were social friends, he was many times asked to work on Sundays and holidays in order to be accommodating. He takes an active interest in the local dental society and is on the best of terms with his neighboring practitioners, frequently inviting them to his house for an evening's entertainment. He considers himself strictly ethical and is jealous of his professional reputation. Having no business expenses to meet

except for materials and supplies, he has been enabled to put aside a little money, which has given him an opportunity from time to time to take various postgraduate courses and keep fully abreast of the times. In fact, he is looked upon as a decidedly successful young man.

But now the scene changes because he has reached the " parting of the ways." He finds that at the end of seven years his practice is so large that he can take care of it only by working steadily from early until late, leaving him no time for recreation by daylight, and that he has broken down three times from the strain. In spite of all these long hours and hard work he has from one excuse or another been making and keeping his fees so low that his gross receipts amounted to only about three thousand dollars a year. He is about to marry and assume the responsibilities of his own household, and he suddenly awakens to the fact that a gross income of three thousand dollars is not sufficient to meet all of the increased expenses and allow him to continue to live in the manner he has established. He feels that he must increase his income, but that he cannot work any more hours or do any more work within those hours, for he

has already overstepped a safe limit; so in dread consternation he asks the question: "Where am I at and what am I to do?"

### "AS YE SOW SO SHALL YE REAP"

This young man went into a settled community without the slightest idea how to discover the cost of an operation or the value of his own services, and because his parents were able and willing to provide him with an office and a home and meet many of his other expenses, he was willing to render his best services for whatever he happened to think a patient might be willing to pay. Naturally, he soon obtained a following and was talked about in the community as a dentist that did good work at wonderfully reasonable prices. He thus entered into competition with men who had office expenses to meet and families to support, and became a means of establishing in that community such a low scale of fees that it became not a competition for supremacy but a struggle for existence among all the practitioners. And yet he felt that he was strictly ethical, an honor to his profession and doing more than his part in elevating his profession in the eyes of the public.

Now let us analyze the young man's situation from a business standpoint and see if we can discover where he was wrong. Had he started in a commercial business, he would have invested his capital in a stock of goods and the necessary accessories whereby to dispose of them. He would expect the business to pay him interest on the investment, and this would be figured as one of the fixed expenses when determining the selling price of the goods. Having chosen, however, to enter a profession, he invested his capital in the necessary education and office equipment. To obtain this education requires four years, during which time, if he had been otherwise engaged, he would have earned at least one thousand dollars a year, or so that a four years' course, including tuition, books, etc., would make an investment, in round numbers, of five thousand dollars. The office equipment will take at least another thousand dollars, making a total investment of six thousand dollars. Interest upon this at five per cent. amounts to three hundred dollars, which becomes one of the fixed charges every year. An allowance must be made for the depreciation and renewal of the office equipment, usually ten per cent.; this will add another hundred

dollars to the fixed expenses. Rent for a suitable office in his neighborhood would be seven hundred dollars a year. Gas, electricity and telephone would be about one hundred and seventy-five dollars. Insurance, dental supplies, stationery, postage and incidentals would amount to about twelve hundred dollars a year. With no allowance made for the services of an attendant or provision for a fixed salary for himself, we find that the total yearly expense account amounts to twenty-four hundred and seventy-five dollars, which deducted from his gross receipts leaves six hundred and twenty-five dollars to represent his salary and profit and loss—about twelve dollars a week, less than the wages of an untrained clerk. Because someone was able and willing to shoulder the greater part of this expense and leave him his gross receipts for spending money, does not change the situation from a business standpoint one iota, nor make it one whit easier for his neighbor, who has a family to support, to compete with the low scale of fees that he helped to bring about. Is it any wonder that a high-minded young man, whose chief aim in life is to be thought well of by his fellows, should be discouraged and disgusted when the facts

are pointed out to him, and that he should bemoan the fact that he was not taught good business methods along with the rest of his professional education?

At the end of his two days' visit he was enabled to see how completely his salvation rested in his own hands and how easy it should be for him to increase his gross receipts one or two thousand dollars the first year. He is going back home, determined hereafter to compete *up* instead of down and try and do his part toward making dentistry a profession that will yield its practitioners a professional income instead of an amount that is less than is paid mechanics in the ordinary trades.

## SALESMANSHIP IN DENTISTRY

Go into a store where there is a really first-class salesman, one who knows his goods and knows people, and let him sell you something. If you're shrewd you'll learn enough to pay the bill several times.

Here are the things to watch for and apply afterward to your own practice.

*First.* The salesman's motive. Most good salesmen get a commission. This is greater from a greater volume of business; therefore he is planning to make your purchases as large as seems wise. You'll not see his intentions, but they are there, and they govern his course.

*Second.* He is anxious to serve you. A really good salesman places at your disposal all his knowledge of the goods. In a reputable store he will guide you wisely in selections. He will always lead you away from the cheap, transient article toward articles of quality. He wants you to get the best.

*Third.* He will say as little as possible about

price, and what little he says will be in such a way as to make price secondary in importance. Note this especially. His talk dwells on what you are to get, never on what you are to give. He seems to say "All this value for so little money."

*Fourth.* He occupies himself with creating wants in your mind. He makes you want things by telling how desirable it would be if you could gain such and such an end. His first task is to build just as big a want in your mind as possible. All his information, all his knowledge of goods, are directed toward this end first.

Maybe you're buying shoes. He first gives you a shoe shaped for your foot. He explains that you need so much room for the foot to spread when standing. Then he gives you a shoe that is soft and comfortable, that has a good counter and heel; that will take a good polish; and that will wear out half a dozen soles. You can't get all these things in a cheap shoe. But by the time you've had them all explained, you don't mind if the price does seem a little high. You pay it because he made you want the qualities.

*Fifth.* If you try to go back to the cheaper shoe you are not satisfied. It doesn't fill the picture he built in your mind. The cheaper shoe is not so well made or lined; it is stiffer to the foot,

it will not polish so well; it will not last so long. The pictures he built and the wants he instilled in your mind govern your action.

*Sixth.* He makes you think the price unimportant. If it seems high, he points out that it is only temporary. What you are buying will

give you service and pleasure long after the price is forgotten. He gets you to view the price in the same way he does.

How can these tactics be applied to dentistry? Very easily. No shoe salesman ever has such opportunities for conferring on the purchaser the greatest physical benefits, as has the dentist. While the shoe gives comfort and service, which, of course, we must have, good teeth give, in addition, the benefits of properly masticated food; these are strength, health, and perhaps life itself. They affect also the appearance and the speech. No arguments which any vender of merchandise can offer as to choice between poor and best, between temporary and permanent, between sanitary and unsanitary, approach in strength the arguments which the facts afford the dentist.

The dentist is fully justified in presenting these arguments to his patient with all the force which truth lends. Indeed, he is unfair to his patient as well as to himself if he does not so present them. Not all patients want the cheaper forms of dental work. But many of them have been accustomed only to such forms of work. Careless or ignorant dentists have persuaded them that such forms of

work are "just as good." It may take a little time to persuade such people into better forms of work, but a majority can be brought to see that such forms are best, and to accept them.

Many of the more intelligent patients grasp at once the advantages of the better forms of work and heartily appreciate the service of the dentist who offers them.

The dentist who offers only his lowest priced services is like the storekeeper who sells only his cheapest wares, while his best and most satisfactory goods lie shop-worn and unused on the shelf.

Here is an actual case of how these arguments were applied:

A patient came in with only the upper centrals, laterals, cuspids and a right upper second molar. On the lower jaw, he had the lower left second molar and the lower right bicuspids and molars. Of course, he could not eat to advantage.

He went to one dentist. This dentist was a good workman, but not a good salesman. He didn't take the pains to explain to the patient the possibilities of his art, the different methods by which he could meet the patient's needs. He didn't create any mental pictures. He offered to make

two vulcanite partial plates for $25. The man went out not satisfied. It was in the country. He drove thirteen miles to another dentist who may have been no better mechanic, but was a better salesman. This dentist saw the possibilities in the case. He first offered the partial plates and used them as a starting-point. Then he described removable bridgework, its steadiness, its comfort, its cleanliness when made on a gold base. He told only the truth. And the patient ordered two Griswold removable bridges at $85 each. That is $145 more than the first man would have charged. But the second dentist painted the pictures in the patient's mind that only those bridges could satisfy.

What was the result? The lower bridge gave perfect satisfaction for several years. The upper bridge needed remodeling. This the dentist did without charge. His patient was satisfied and happy. He appreciated his bridges. And he sent new business to that dentist.

If you are seeking to extend your practice, to make it more remunerative and to keep it professionally of the best character, the adoption of such methods will prove very successful.

## GIVING PATIENTS PROPER CONCEPTIONS OF DENTISTRY AS A MEANS TO BETTER FEES

THE experience of those dentists who have succeeded in giving their patients right conceptions of the importance of good dental service shows that it is possible to get excellent fees according to the location, and get them promptly.

This would mean that any dentist now struggling to lay up a bare competence would really prosper; that he and his family would enjoy comforts and luxuries all through life.

But how can it be done? How can the dentist, situated in the small town or small city and surrounded by dentists who are anxious for business at almost any price, raise his fees and extend his practice?

We may profit by studying how others handle us when we are the buyers. We can apply the lesson to our own practices. Suppose you accompany some lady of your own family to buy dress-goods. Your lady has a moderate-priced silk in mind. The

salesman first shows her that. Then he says "Here is something a little better," at the same time showing the sample. *He doesn't say much, if anything, about the price.* He talks quality, durability, ap-

pearance, etc. He raises the mental conception of the value which the customer has till the silk first shown can no longer fill the mental picture, and it is discarded because it fails to please and the better silk is purchased. He has led her through

four well-defined mental steps, attention, desire, conviction and action.

All luxuries are sold on this basis. Why does a family who can ill afford it buy an automobile? Because the mental picture of the possibilities of pleasure over-rides the thought of the actual cost. Are they thinking of expense, accidents, dangers? So long as they are, they will not buy. But when the mental conception paints strongly enough the pleasures of swift rides through green fields, along fine roads and by pleasant scenes, they will readily part with more than the entire family would spend for dental work in a lifetime.

This was recently proved by the experience of a Detroit dentist. After much haggling a patient accepted a bridge at $125. An automobile salesman came in while the bridge was being fitted. The patient wrote a check for the bridge at $125, remarking how much dentistry cost. He immediately afterward wrote the salesman a check for $3,725 to pay for a new automobile, handing it over in plain sight of the dentist. His mental conception or picture of the benefits he would receive from dentistry was dim and uncertain. The automobile salesman had been more skilful. He had

painted an attractive picture in glowing colors. And the man paid according to the pictures.

*The mental picture is what influences people:* Make the mental picture of the benefits of dentistry strong enough and patients will willingly pay excellent fees for dental work. Shrewd dentists realize this. *They take as much pains to educate their patients as they do with their work.* They paint in their patients' minds mental pictures of health and vigor from perfect mastication and digestion; of the beauty of skilfully restored teeth, and of their influence on the features. The quality of the work can be steadily raised in this way and the fees advanced.

Here is a concrete case:

Janes is a dentist in a small city. He gets $1 for an amalgam or cement filling. There are six other dentists in town. Four of these work for fees which are no greater and sometimes are a good deal less. There are two dentists who get better fees.

Janes decides to see if his practice cannot be made more profitable. He realizes that in proportion to the value of his services to the patients, his fees are very small: *In other words, he does not*

*get his proper share of the benefits.* This realization *is the first necessary step.* He must have conviction in his own mind before he can instil confidence into the minds of his patients and carry it over to the point of action. That will be the measure of his success—carrying conviction into action.

He knows that if he could get $2 for an amalgam filling, he could make a much better filling and at the same time receive more profit. He begins on the very next patient. It is a case for a bicuspid amalgam filling. He offers the usual filling at the usual price, explaining that if the patient will permit, he can put in a much better filling at a little higher price. *But he doesn't mention the price till he has painted a clear-cut mental picture of the better filling in the patient's mind.* He explains that he can take time to prepare the cavity better, that he can so contour the filling that it will do much better service and last much longer. He honestly enumerates the resulting benefits.

When the patient asks the price he says $2. Maybe the patient does not take it. But by-and-by one patient after another *will* take it. Many of his amalgam fillings will bring him double what they brought before, and with success comes that mys-

terious power of conviction which success invariably gives. This helps him convince a still larger percentage of patients.

Many dentists are awakening to these possibilities. They build in their patients' minds clear-cut mental conceptions of the importance, beauty and final economy of good dental work, and a large percentage of patients willingly pay in proportion to the elevation and strength of the conceptions which the dentist builds in their minds. This line of patient-education will well repay any dentist.

## HOW IMPORTANT IS DENTISTRY TO THE PATIENT?

MANY a dentist who is struggling to get better fees will be greatly assisted by determining whether his services are important enough to justify good fees. A recognition of the value of his service is the first step towards securing proper fees. It must take place in the dentist's own mind. When it has been determined, the dentist has a starting point from which he may begin operations to secure satisfactory fees.

To advance fees without losing desirable patients, the dentist must so advance his patients' conceptions of the value of his services that they will be willing to pay advanced fees. But he must first have his own conceptions well-grounded and clear cut.

In determining the value of his services, the dentist may reason as follows:

*First.* His services affect materially the health of the patient. They are, therefore, among the most important which the patient receives. Such

services are very much more important to the patient than securing the mere pleasures of life. The dentist should educate patients to see that when it comes to a choice of expenditure for dental services or pleasures, there can be but one right decision. That is in favor of the dental services.

Evidently, the patient who willingly pays two dollars for a theater ticket and begrudges two dollars for an amalgam filling, needs to have her conceptions of the importance and value of dental services corrected.

*Second.* Dental services are very much more important than luxuries. A lady is entitled to wear good clothes and hats, also good shoes, etc. But many of our patients spend for these articles much more than is required to purchase good quality and excellent style. They easily run them into high cost and short duration. A lady in comfortable circumstances will pay $15 for a hat, and get a denture when she could have a bridge. Maybe she will economize on the denture and get a finer hat, because her conceptions of hats are clear and strong. They occupy a large place in her mind. Her conceptions of

dentistry are not clear. She has no knowledge of its importance; it is, to her, largely a matter of price. The dentist whose conceptions are well enough defined may correct hers, a little at a time, until she reaches a point where she will economize on the hat to have a bridge rather than a denture.

*Third.* Dental services are very much more important to the patient than many of the little transient expenses common to all of us. We all buy things we do not need. Most of us frequently pay more for trifles than their value justifies. Patients do this, also. A lady who frequently pays $1 for a pack of cards for home playing recently objected to a reasonable price for an important restoration of an upper anterior tooth. Her conception of the importance of dentistry was very low.

What important services does the dentist render his patient?

(*a*) He preserves the natural teeth. This is one of the greatest services which can be rendered to any person. The teeth alone make possible

proper mastication and insalivation of food. They are important factors in digestion and assimilation. Since these are essential to life and the enjoyment of health, it is evident that the preservation of the natural teeth is one of the greatest benefits within the realm of human effort.

(*b*) The dentist replaces lost teeth. According to his skill and the conditions of the case, he makes proper mastication again possible. He places a renewed lease of life, as it were, in his patient's hand. He equips his patient to meet the tremendous nervous strain of to-day. The needs of the tissues from exhaustion and the processes of age can then be much better met than would be otherwise possible. The health of the stomach is often restored or retained. By replacing lost teeth the dentist enables his patient to live better and longer; and in proportion as the patient's life is valuable to him, these services should be valuable.

The restoration of the teeth safeguards the health of the throat. Loss of teeth is accompanied by a drying of the throat tissues and increased susceptibility to infection.

(*c*) Proper oral cleansing by the dentist is a most effective assurance policy on the patient's gen-

eral health. If the teeth are uncared for, particles of deposits are rubbed from the teeth during mastication and taken into the stomach. These deposits contain the germs of many common diseases. They often contain poisons, the result of fermentation.

The dentist who frequently and properly cleanses the oral cavity and teaches his patient to do so, spares his patient taking these deposit materials into the stomach. His care lessens the number and virulence of the bacteria inhabiting that mouth. Here the importance of the health of the throat, as influenced by the teeth, becomes apparent. In cases of physical depression on the part of the patient, serious diseases, such as tuberculosis, pneumonia and diphtheria, attack the organism. Only too often these attacks are conducted from a seat in the mouth. If proper care has protected the health of the throat, and has weakened the germs which inhabit that mouth, the patient will be less susceptible to dangerous infection. The dentist's care often makes all the difference between life and death.

(*d*) The services of the dentist affect very materially the patient's appearance. This is most noticeable in the correction of mal-positions, but it is

equally valuable in restoring decayed teeth and replacing lost ones.

Appearance is very important to each of us. The knowledge that we appear well or ill affects our enjoyments. It greatly influences the estimate others form of us. It is no small factor in success in life.

More than luxurious hats, more than ultra fine clothes, the appearance of the mouth affects the appearance of the face. The writer recently beheld with pleasure a lady with a handsome face, fine figure and superbly dressed. As her lips parted in smiling, badly malposed and neglected teeth shocked the beholder; no beauty of face, form or clothes could offset in any degree this ruin of the mental picture. Any competent dentist could have made her wholly a thing of beauty.

Such benefits to the patient surely justify the dentist in a high conception of the value of his services. They furnish him, also, the means of educating his patients and of constructing similar impressions of value in their minds. The patient who is shown the intimate relations between the teeth and health, and again between the teeth and appearance, will place her teeth high on the list

of objects justifying care and expenditure, and will pay a fair price for good services. When her education has progressed to a certain point, she will not accept cheap services, nor go to a dentist in whom she has not confidence.

Thus the proper conception of the value of his services on the part of the dentist may be re-created in the minds of most patients. They require only patience and intelligent explanations by the dentist. These, of course, must be often repeated. Most patients can be immediately interested. At succeeding visits they can be led, step by step, along the paths of dental knowledge, and as they progress fees can be advanced until they are fair to both the operator and the patient. Thus the fee question, so important to each of us, can be settled without arousing antagonism and without the loss of desirable patients.

# SEEN THROUGH THE PATIENT'S EYES

These articles were written by patients telling what they think of dentists and their offices. The community takes a man's measure pretty accurately, whether he is a tradesman, a preacher, or a dentist. Sometimes we go through life ignorant of this measure-taking. We do not know how others see us. If we, as dentists, could see ourselves through the patient's eyes, it would help us correct many faults, some of which may have stood in the way of the success we were trying so hard to deserve.

These articles are not merely critical; they contain many useful hints. If they hit you, do not condemn them or get angry till you see whether they are right; because these are the views of the people who carry the money you must have. If you don't deserve it from their viewpoint, some other dentist will get it. To learn if they are right, go out of your own office, forget that you are a dentist and then come back with the viewpoint of a patient. I refurnished my office once on a hint like that, and it paid.—EDITOR.

Do the majority of dentists realize the impression they create before they are seen?

Judging from the number of slovenly, ill-kept offices it is safe to assume that some of them never give the matter a thought.

Just why this is so is a source of conjecture. But it does seem that an intelligent man starting in any kind of business would take into consideration every detail of whatever business or profession he had in view. The dentist may be a man of

means or otherwise, but in either event the same rules apply: cleanliness, first-class work, up-to-date equipment and clear-cut business methods.

We will suppose a stranger in a city or town needs the services of a dentist and is not recommended to any one, is it not reasonable to presume that he or she will select a clean, attractive-looking office in preference to one reached through a dingy, dirty hall and stairway?

Some dentists cannot afford to have an expensive office, but every dentist can have a clean one no matter how small the office or unfashionable the locality.

Patients get their first impression on entering the hallway and outer office; if these are immaculately clean the first step into their confidence is taken. But this is not all by any means. The inner office or operating room must reveal a man just as immaculately clean as the office itself; he must be well groomed in every sense of the word, his close physical contact with his patients demands it; there is nothing so obnoxious to most people as the odor of perspiration, or a breath reeking with alcohol, stale tobacco, bad teeth or a disordered

stomach, and it is absolutely essential to eliminate them if the practitioner is to have any degree of success.

It is also essential to have a first-class, up-to-date equipment. Some dentists maintain it is not necessary; however, that may or may not be true. But close observation has proven that it does inspire more confidence, admiration and boosting than antiquated furnishings, and if a patient has confidence in his or her dentist they usually go out of their way to recommend him to friends and acquaintances which means the practice is sure to increase.

On the other hand, regardless of how capable a dentist may be in every branch of his profession, he will never attain any great success with obsolete equipment and uncleanliness, because nothing will drive patients away quicker than fear of a clap-trap, rattley foot engine or a stagnant, unsanitary cuspidor.

If instead of occupying so much of their time wondering why patients do not keep appointments, continually grumbling and complaining of business being bad, they pay some attention to keeping themselves and their office clean, well ventilated

and modern, the results would soon be increased patronage.

The utmost privacy in an office cannot be too strongly advocated, as most patients being human have a tendency to give vent to their suffering during an operation, yet are humiliated by the presence of disinterested parties. Or they may wish to refer to their account, yet do not care to discuss it before a third person. Again, if a little more consideration were shown patients and they were seen immediately upon entering the office instead of having them wait an unlimited time unnoticed, it would often prevent them from becoming nervous or going away.

Therefore cleanliness from the ground up, modern equipment and consideration of patients combined with conscientious work are the best of all impression-creators and practice-builders.

### EXPERIENCES WITH CITY DENTISTS

*To Editor of* DENTAL DIGEST: May I, an outsider, be permitted to contribute to the DIGEST my views as a patient with the earnest hope that they may be of help to some dentists?

For the past three months I have been suffering from a tooth with a bad root condition, which has caused me to spend much time at my dentist's, and many days I have had to wait for him. On these occasions it has been my custom to read some of the periodicals always at hand upon his center table. In looking over THE DENTAL DIGEST, I read "The Value of First Impressions to the Dentist." I then became much interested, for I was a patient, and as such I have had some strange experiences; so I thought by relating them to you, possibly they might convey a gentle little lesson to those in need of such. Dr. Brush asks, "Have you ever wondered what were the first impressions of a new patient upon meeting you in your office? Are you sure you would like these impressions to be the lasting ones?" "Do the surroundings and incidentals that create these first impressions convey just the ideas that you would like impressed upon patients that visit you for the first time?" I think I can answer, from one patient's viewpoint, if you will permit me to relate my experiences with two or three dentists I have had the misfortune to meet in their offices once and *once only*. Could those men know what impressions they made upon your hum-

ble servant (and others), surely they would change their ways and surroundings.

My first experience was about ten years ago. I had a toothache with no decayed tooth that I could see. But the ache was there all the same. I had no preference as to a dentist, for I was a stranger in New York, but a friend advised me to try some one who, it was said, had been very successful with a friend of hers. "Then you have no personal knowledge of him?" I asked. "No, only what I heard; but I will inquire and let you know, for there are dentists and dentists." A few days later I received the following information: "For goodness' sakes, don't go to Dr. R——. I made a mistake. He is simply awful. He did not do her work at all; it was some one else. She did call upon Dr. R—— for an appointment; she never made one and for the following reasons. She found he had two small offices, a front one and a little stuffy back one for a waiting-room; this was overfull with all kinds of broken-legged chairs, and a sofa with frayed-out cushions upon it; the floor was covered with a greasy-looking carpet and up in one corner was stored a sewing machine; the glass over the mantel was so thick with dust that

you never could have seen your face had you tried. K—— says she would have backed out on the impression already received from the general appearances, but he had seen her enter and she knew he would hail her as she passed. Presently he let out his patient, telling a little girl to take the now vacant chair. K—— made a motion, but with rather a grand air he waived her back, saying, 'I will see you in a few minutes,' while he looked at a letter which laid on the dusty, grimy-looking hall table, after which he rubbed his eyes, scratched his head, ran his hand through his beard, and without washing his hands, made an attack on the little girl's mouth. That was too much for K——. She stole to the door and fled. So you see you do not want to go to *him*." I did not indeed.

I heard incidentally that there was a very clever dentist in Brooklyn, "rather eccentric, but a good dentist." I went. As to his eccentricity, if what I saw passed for eccentricity, he was eccentric indeed. One look as he came forward in a greasy, half-worn Tuxedo coat very dusty and crumby from a late breakfast, sufficed for me; but the position was awkward; I had to make an appointment, and while he looked over his book, which seemed to

have plenty of open dates, I took stock of his "eccentricity"—dirty finger-nails, hair long and rumpled, soiled collar and cuffs, the latter much frayed out, an unsavory spectacle altogether. To make it worse, he was crunching something. I had noticed, too, whilst waiting for him, that the same towel used by the first patient was transferred to the second. I made the appointment, but I never kept it.

Later I found a dentist quite up in every way to my standard, and I think there are more like him. This man has two large offices, his own little office, also a smaller one, where a patient can rest while a filling is drying without having to go out among the waiting people (and, by the way, he never has a crowd waiting. Does a dentist who keeps his engagement book straight need to keep his patients waiting? I do not know; I should think not; my dentist has but a few waiting, and I happen to know that he has a lucrative practice). The floors of these offices are waxed and shining; the centres are covered with good, but not expensive rugs, there are a number of comfortable chairs—several of them are rockers—a sofa, *not* a couch, in each room (the couch is in the little office and is cov-

ered with linen crash as also are the cushions that lie on it); there are several tables upon which you will always find pleasant reading matter, including the daily papers. There are a few very attractive engravings on the walls, and mirrors over the mantels.

Behind a screen in the back room is a small table over which hangs a glass; a pincushion and some hairpins lie upon the table. There is no brush —for who would use the "house" brush for his hair? Clean shades cover the clean windows and over them spotlessly clean, dotted muslin curtains hang. Delicate white mull sash curtains are also hung before the lower window panes in the operating office. There is a young girl, very nice, very sweet and clean looking, in attendance, who removes everything that is unpleasant as soon as each patient vacates the chair, so that the next one shall not see what she has to go through. All is perfectly clean; the towels are sweet smelling, and every patient has a fresh one whether the last one used is soiled or not.

My dentist is not handsome except in the sense of "handsome is as handsome does," and in this light he is *par excellence*. He is what one would

call wholesome looking. He *looks* clean; his hands and nails are all that they should be; he wears a mustache, but no beard to tickle your ears, eyes and nose as he works; in this, as Dr. Brush says, he has "a financial asset." He wears "white duck coats," and he does not need to hang out his "diploma" in the waiting-room; he carries his credentials always with him—in his face and manner —they show that he knows his business. Much of this has been possibly acquired by study and a desire to please; to do his best for his patients and by so doing he has done well for himself.

You say to him, "Doctor, will it hurt much?" With a pleasant smile he will answer, "I hope not, but I can't promise. I'll be as gentle as I can." And you have confidence in him, and if he does hurt, you bear it, and feel that he has done the best he could. I think a patient would much rather know what there is to bear than to be assured that it will be merely a "pin prick" and then receive a jab that will nearly make one cry out "murder" (and I know this has been done). In short, he is just what a gentleman of my acquaintance says he is: "A blankety nice fellow all through and knows his business from A to Z."

It is impossible to over-emphasize the importance of absolute cleanliness and order in a dentist's office—not simply in the operating room, but in his reception and consulting rooms. Only exceptional circumstances will ever remove the disagreeable impression received by a person who visits a dentist for the first time and finds himself in an untidy reception-room—on the floor a faded carpet, nice in its day, which was a long time ago; two discouraged-looking plush chairs, one of plain blue, the other of figured green, both with the nap worn off the back and arms by a long succession of nervous victims; a tapestry covered sofa, with a broken spring, in one corner; across the room two bentwood chairs of imitation mahogany; and in the middle an oak table covered with torn "comic" papers and uninteresting magazines not less than a year old; the whole pervaded by a general atmosphere of "clutter" and neglect. On the walls of such a room are always to be found art calendars advertising Swift's Hams, Castoria and the Prudential Life Insurance Company, setting off to great advantage old-time engravings tabooed by the dentist's family and doomed to spend their last days with his helpless patients.

Should the dentist's reputation be so favorably established that the new visitor has the courage to brave the horrors of waiting in this room until his turn comes, in spite of a yearning wish to leave before it is too late, he then goes into an operating room, where the first thing to meet his eye is a black walnut cabinet, with one hinge off the upper door, and a lower drawer half open displaying ghastly horrors. Passing this and wending his way by a table covered apparently with everything the dentist has been unable to get into the cabinet, but of which his hasty glance reveals chiefly an appointment book, a pile of appointment cards, a set of false teeth, a plaster cast, a spool of dental floss and an alcohol lamp, the victim finally reaches the chair of heavy red plush, which stands in front of an open window, where a brisk draft can play about his feet, steps hesitatingly onto the worn foot-rest, puts his head into the vise-like head-rest, and as a tray full of vicious-looking instruments is swung under his nose, utters a deep groan and closes his eyes. "The rest is silence," punctuated only by requests to "open wider" or to "spit."

Although merely a layman, he knows that this dentist, who, by the way, is dressed in a blue suit

of heavy, rough material, with dusty sleeves and spots on the front of the coat, is not in line with the progress of his profession—that dentistry is now a science, an important and exacting branch of surgery, that the glass and porcelain fittings of any surgical operating room should find their counterpart here, since antisepsis is the guiding principle and foundation of all surgery. Knowing this, he either assumes an apologetic attitude toward the dentist, saying he "guesses he is good enough for the little I want," or goes elsewhere.

He is also aware that the canons of both policy and good taste demand an attractive, simple reception room, furnished with well-made but not necessarily expensive furniture, built in strong, simple lines, each piece in harmony with the others; that dust-catching upholstered furniture should be banished as untidy; that magazines torn and soiled from handling should be burned; and that there should be few pictures, and those in good taste. And the greatest desideratum of all, he knows, is to keep everything in such condition that the room *feels* clean, as well as appears so.

Being a layman, he cannot point out to the dentist the exact particulars in which his equipment is

lacking; but he feels that something is wrong, and if later he goes to a dentist who is keeping up with his profession in its rapid progress, he at once realizes the improvement, and it is the latter dentist whom he continues to visit. At this man's office he finds a reception room which is at once business-like, tasteful and attractive; a dentist whose white coat is immaculate; an operating room fitted out in spotless white, with every device possible to assist the operator to attain the highest ideal of modern scientific dentistry.

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When I go into the office of a dentist whom I do not know, I observe the details carefully and feel pretty sure before I see the dentist whether I wish him to do my dental work or not. If the office is finely furnished but untidy, it gives me a feeling of doubt as to his efficiency, because if he is careless about the appearance of his reception room he will be careless about the quality of his work. On the other hand, a modestly furnished, well-kept room gives the impression of a thoughtful, careful and thorough man, and makes you feel certain that he will do the best possible work for you in the most careful manner.

An untidy office, elaborately furnished, always gives me the impression that if I had anything done there I would be charged an exorbitant price for cheap work. If I were employing a dentist continuously, I would be more willing to pay a higher or even exorbitant price if I knew the surplus of his profits was going back into modern antiseptic appliances (by which I would be indirectly benefited) than into plush curtains and flashy furniture, which only tend to irritate a waiting patient who is at best uncomfortable.

A neatly kept reception-room, modestly or even plainly furnished, has a chance while you wait to indelibly impress upon you the general impression of the dentist who maintains it—and "straws show which way the wind blows." A waiting-room also has the chance to depress or encourage a patient who is suffering from some malignant disease or who is waiting in great pain.

I would not submit to an operation in any operating room that I was not absolutely convinced was as modern as could be and the best possible. My money is precious, but it is absolutely no consideration in comparison to the preserving of any detail of my health. Modern scientific appliances, to-

gether with a favorable knowledge of the operator's experience and ability, give me confidence that my operation will be as successful as it is possible to make it. You ask if I would "*prefer* to patronize a dentist who has modern equipment," to which I reply that I would refuse absolutely to patronize a dentist who had not the most modern, for the best is none too good in such serious work.

To your last question I would say that a few years ago the New York, New Haven and Hartford Railroad tried to reduce expenses by leaving the brass work unpolished when the engine went into the roundhouse, with the result that the number of accidents increased considerably because the train crews took less pride and grew careless, showing the important effect of seemingly small details of environment. A shine on a man's shoes is not as good for the shoes as it is for that man's self-respect. Hence neatness and every modern appliance has an unconscious though none the less good effect on the better quality of any dentist's work. Every dentist can afford the best, too, because with the improvement in his office outfit will come a proportionate increase in patronage as sure as day follows night or as effect follows cause.

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